Massachusetts Commission on the Status of Women



Fiscal Year 2017 Annual Report

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COMMISSIONERS, STAFF AND INTERNS

Remarks from the Chair



On behalf of the Massachusetts Commission on the Status of Women, it is my pleasure to present our FY2017 Annual Report. It was an exciting and active year for the Commission. Having been strongly involved in advocating for the Equal Pay Bill

(among other legislative priorities), we are thrilled this landmark legislation passed in August 2016. Since then, we have led numerous equal pay education panels for employers, employees and those seeking work; held four public hearings across the Commonwealth; heralded the creation of two new regional CSWs; proposed three more regional CSWs and continued supporting existing ones; hosted our sixth annual Advocacy Day at the State House; and in June, we honored more than 115 Unsung Heroines from across the Commonwealth.

Margot N. Parrot, Esq.

MCSW Chair

Commissioners

Margot Parrot, Chair, Athol
Denella Clarke, Vice-Chair, Hyde Park
Carolina Avellaneda, Secretary, Winchester
Lauren Scribi, Treasurer, Quincy
Tahirah Amatul-Wadud, Springfield
Penny Blaidell, Marblehead
Marianne Fleckner, Westford
Rebecca Glenn, Waltham
Denise Hurst, Springfield
Nina Kimball, Plymouth
Joanne Fitzgerald McCrea, Salem
Sara La Cour, Amherst
Maria Puppolo, Springfield
Sara Schnorr, Holliston
Reena Thadani, Boston

Staff

Jill Ashton, Director
Kelly Lynch, Outreach Coordinator

Marydith Tuitt, Boston

Interns

Ellie Adair Grace Gustafsson
Elise Bohmer Nadia Mohammad
Campbell Brown Jordan Moskwiak
Sarah Chin Alexis Serino
Arianna Davis Morgan Trevett
Ellie French Kate Vanier
Isabelle Greene Sophie Zamarripa

INTRODUCTION

Mission

The mission of the Massachusetts Commission on the Status of Women (MCSW) is to provide a permanent, effective voice for women across Massachusetts.

Charges

Under MA Chapter 3, Section 66 of the Massachusetts General Laws the MCSW is empowered to:

- Study, review and report on the status of women in the Commonwealth
- Advise executive and legislative bodies on the effect of proposed legislation on women
- Inform leaders of business, education, health care, state and local governments and the communications media of issues pertaining to women
- Provide referrals and serve as a resource of information on issues pertaining to women
- Identify and recommend qualified women for positions at all levels of government
- Promote and facilitate collaboration among local women's commissions and among women's organizations in the state
- Serve as a liaison between government and private interest groups concerned with issues affecting women

Organization

The Massachusetts Commission on the Status of Women is an independent state agency charged with reviewing the status of women in Massachusetts and offering recommendations regarding policy that would improve access to opportunities and equality. The Commission is composed of 19 commissioners, who are appointed by one of four appointing authorities: the Governor, the Senate President, the Speaker of the House, and the Caucus of Women Legislators. Commissioners serve in a voluntary capacity and the work of the Commission is facilitated by two part-time staff members who are assisted by year-round interns.

The full Commission meets monthly, September through June, as does the MCSW Executive Committee. In addition, each commissioner is a member of at least one standing committee that generally meets monthly. The standing committees include:

Legislative and Public Policy Committee

Program and Planning Committee

Budget and Personnel Committee

This 2016-2017 Annual Report includes the Commission's activities and findings for the period of July 2016 to June 2017.

2017 RECOMMENDATIONS TO APPOINTING AUTHORITIES

In accordance with the responsibilities of the MCSW under MA Chapter 3, Section 66 of the Massachusetts General Laws, the MCSW respectfully submits the following recommendations for action to our appointing authorities:

Support legislation that addresses the issue of women's self sufficiency and economic security

discrimination and a direct violation of the Massachusetts authority. Equal Rights Amendment.

of serious personal or family medical emergencies, most approved contraceptives in the Commonwealth. MA families face losing their jobs to care for themselves, their families or children during these times, particularly in low-income and single parent households. This harsh reality disproportionately affects women as they tend to be the The Commission supports and is invested in the further primary caretakers of the family and are increasingly the primary bread winners.

Protecting the rights of pregnant workers in the workplace is also necessary to ensure women don't have to choose between their own or their babies' health and economic security. By demanding that all employers provide reasonable, temporary accommodations to pregnant workers, the Pregnant Workers Fairness Act (H3680) would protect women's health and safety at work but also benefit businesses in the form of increased productivity, lower turnover and reduced costs on worker's compensation and in- Support legislation to help end female genital mutilation surance costs.

ing it easier to arrange childcare around a predictable work schedule, and be without unfair penalty for last minute caretaking duties. An Act Establishing Just Schedules for Employees (H3144) would establish employee rights to additional payment if they are not given sufficient advance notice of any changes to their work schedule in the retail, fast food and hotel industries of the Commonwealth.

Support legislation to provide medically-accurate sexuality education, and protect access to contraceptives

Ending gender discrimination in disability insurance poli- The Commission envisions a healthy, well-informed popucies with An Act Providing for Equitable Coverage in Disa- lation of youth across the Commonwealth, and sees An Act bility Policies (S545/H482) is a key component of establish- Relative to Healthy Youth (S2071/H3704) as a vital compoing women's full self-sufficiency. Women face unnecessary nent of that end goal. This bill sets a standard benchmark financial burdens when purchasing individual disability for health education and states that any Massachusetts insurance. As one of the only two types of insurance in the public schools that decide to provide their students with state that can legally charge women more than men, disa- sexuality education must select a comprehensive, medicalbility insurance providers often charge women 25% to 75% ly accurate, and age-appropriate curriculum while remore than their male counterparts. This is blatant gender specting the rights of parents and local decision-making

With the aforementioned youth well-informed, we strong-Guaranteeing family and medical leave with An Act Estab- ly urged legislators to protect access to contraceptives by lishing a Family and Medical Leave Insurance Program passing An Act Advancing Contraceptive Coverage and (S1048/H2172) is another important step toward estab- Economic Security in Our State (ACCESS, S499/H536), lishing self-sufficiency for women. Despite the universality which will expand health insurance coverage of all FDA-

Continue the establishment of regional and local Commissions on the Status of Women

establishment of county and regional commissions on the status of women. An Act Establishing Three New Commissions on the Status of Women and Girls (S1119/H1110) would allow further commissions be created in the same model as the MCSW, and the eight existing county and regional commissions. The creation of the an Eastern Regional Commission, an Upper Middlesex Commission, and a Plymouth County Commission is consistent with the Commission's goal of increasing women's participation in the Commonwealth.

among practicing communities

Another way to protect women's self sufficiency is by mak- This common-sense bill—An Act to Protect Girls from Female Genital Mutilation (S788/H2333) - would require mandated reporters to make a 51A report to DCF if a child has suffered from physical or emotional injury resulting from FGM, and criminalizes the acts of committing FGM on a child or taking a child in or out of the Commonwealth to commit FGM. It would also create a program for education, prevention and outreach for communities that practice FGM that would reduce the health consequences, death in childbirth and lifelong trauma that results from the removal of girl's sex organs for non-medical reasons.

MCSW BUDGET

Commission on the Status of Women BUDGET FY17		
	FY17 GAA	
Total Income from State Appropriation	\$115,085.00	
Expenses		
Salaries	\$81,810.00	
Operating Expenses	\$28,215.00	

Remarks excerpted from the presentation to Joint Committee on Ways and Means April 3, 2017

CSW spokesperson: Margot Parrot, Chair

The Massachusetts Commission on the Status of Women (CSW, 0950-0000), respectfully requests your consideration of allocating \$150,000 for the Commission's FY2018 budget in order to fulfill its mission of closing gender gaps for women and girls in the Commonwealth. During budget deliberations, the Senate approved this amount in recognition that a budget increase was necessary.

The CSW is an independent state agency, legislatively created in 1998, that exists to provide a permanent, effective voice for women across Massachusetts, while advancing women toward full equality in all areas of life and promoting their rights and opportunities. Upon its creation, the Legislature deemed it appropriate that the Commission operate under a budget of \$198,000. The agency's budget was cut dramatically in 2010 from \$252,634 to \$70,000.

The Commission has been strategic in its program and salary spending, and has continued to be a successful advocate for women and girls despite the limitation of its budget. However, we recognize that this success is in need of a strong foundation in order to sustain the gains we have already achieved and to address the inequities and hardships that still persist among women and girls in Massachusetts. Through the Commission's commitment to public hearings and expanding the reach of regional women's commissions, the agency is steadfast in its responsibility to ensure that the policies created on Beacon Hill reflect their needs.

Though the budget has remained relatively limited, the Massachusetts Commission on the Status of Women has accomplished a great deal and continues to expand its programming. The agency has stewarded the establishment and oversees the work of eight regional commissions representing women in the Berkshires, Bristol, Essex, Cape and Islands, MetroWest, Hampden, Hampshire/Franklin and Worcester. In total, more than 75 women serve in a volunteer capacity as regional commissioners representing their communities and urging policies and programming to increase women's equality.

It is likely that before the end of the current legislative session three more regional commissions will be established (Eastern Regional, Upper Middlesex, and Plymouth). Current and future regional commissions function without paid staff or financial resources and thus rely on the MCSW staff for advice, scheduling and operations. The benefit of these commissions is the opportunity to exponentially expand the reach of the state commission's work, with limited but extremely well used resources. The regional commissions provide on the ground data about the status of women in their communities.

In addition to work around regional commissions, the CSW led the advocacy effort to see the Equal Pay bill signed into law last session. The CSW served as Chair of the Equal Pay Coalition and is still committed to providing information on the law to employers and employees. The CSW currently has nine priority pieces of legislation and numerous other endorsed bills that Commissioners will work to see passed this session.

In an effort to promote advocacy around legislation and government engagement, the Commission hosted its sixth annual Advocacy Day in May at the State House. Over 400 women and girls registered to participate and they were able to learn about building a relationship with legislators and how to discuss and engage in legislative advocacy. The CSW is also proud to continue to host the annual Unsung Heroine celebration at the State House where over 100 extraordinary women from across the Commonwealth are celebrated for their contributions to their communities.

Given the recent progress and achievements of the Commission, we respectfully request our funding for FY18 to be \$150,000. This strong foundation will allow the CSW to further amplify our impact on gender inequities in the Commonwealth and continue to be a good partner in government. Thank you for your consideration of this request and for your continued commitment to women and girls in Massachusetts.

PROGRAMS, ADVOCACY AND EDUCATION

Public Hearings

In keeping with its mandate to study and report on the status of women and girls living in the Commonwealth, the Commission holds regional public hearings to hear the concerns of women. Area legislators and public officials are invited to attend. The public hearings are essential for the MCSW: they provide a voice to women from the whole Commonwealth to share their concerns and the Commission uses hearing testimony to shape and influence its legislative advocacy work and its annual recommendations to the appointing authorities. They are both a source of information and motivation.

The Commission held four public hearings during FY 17:

North Adams Public Hearing, North Adams City Hall, October 18, 2016

Key issues raised at this hearing included:

Lack of free legal services; Childcare affordability; Opioid crisis; Lack of youth-specific services to tackle opioid addiction; Unique needs of rural Massachusetts vs. urban MA; Local hospital closure and resulting lack of rural maternity services; Transportation; Lack of detox and stabilization center; President Trump social services funding; Sexual harassment; Impoverishment; Family medical leave; SNAP benefits; State-sponsored retirement; Child abuse; Suicide; Family planning services; Learning disabilities; Bipolar disorder; Sexual abuse;

Salem Public Haring, Salem State University, November 15, 2016

Key issues raised at this hearing included:

Free sexual assault services; Benzodiazepine addiction; Family planning services; Anti-women/anti-immigrant rhetoric of President Trump; Targeting undocumented immigrants; Support services for breastfeeding; Domestic violence; Lack of free legal services; Childcare availability; Special needs engagement; Minority engagement; Homeowners, especially older ones, being targeted by insurance companies; Single mothers as economic issue;

Leominster Public Leominster Public Library, January 24, 2017

Key issues raised at this hearing included:

Special needs childcare; Special needs under President Trump; Medicare; Education; Teenage pregnancy; Sex education; Sexually transmitted infections; Women's marches; Homeless women and children; Opioid crisis; Food insecurity; SNAP benefits; Eviction; Domestic violence; Benzodiazepine addiction; Transportation issues; Divorce;

Wareham Public Hearing, Wareham Free Library, February 28, 2017

Key issues raised at this hearing included:

Universal healthcare; Medicare; Domestic violence; Post-election concern; Planned Parenthood support; Freedoms of the LGBTQ community; Civic engagement; "Fake News" education; Targeting undocumented immigrants; The Living Wage; Access to reproductive healthcare; Childcare affordability; EOSL funding; Paid family medical leave; Civic education; Voting in non-presidential elections; Equal pay support; English training for immigrants; Immigrant domestic violence and sexual assault; Opioid crisis; Women in management; Arts funding cuts; Mental health resources; Climate change; Student loans; Slavery;

Full hearing reports are available in the appendix.

PROGRAMS, ADVOCACY AND EDUCATION

MCSW Speakers Bureau

Through the Speakers Bureau we share the expertise of our Commissioners and staff to speak at various panels/events with the aim of raising awareness of women's issues, educating women about the resources of the Commission and encouraging women to engage in advocacy to achieve positive change for women throughout the Commonwealth. The 2016-2017 MCSW Speakers Bureau included of the following engagements:

- November 18, 2016, Boston: New England Women's Policy Conference- Equal Pay Legislation in New England Panel- Jill Ashton
- Jan 12, 2017, Boston The Boston Club: Equal Pay: Now the Law in MA Panel- Get the inside Scoop- Jill Ashton
- January 26, 2017, 6 PM. Boston: Simmons Night, Hosted by MASS NOW- Equal Pay Panel- Mary Tuitt
- January 27, 2017, U Mass Lowell, Annual Career Conference, *Diversity in the Marketplace Roundtable- Marianne Fleckner*
- February 8, 2017, Hyannis: CCICSW, The Legislative Process Overview- Mary Tuitt and Laura Scribi
- March 8, 2017, Boston: Greater Boston International Women's Day Planning Committee, Responding to Changing Policies; Engaging Women's Voices Panel—Tahirah Amatul-Wadud
- March 8, 2017, Bay Path University, Longmeadow, MA, On the Move Forum 2017- Denise Hurst
- March 12, 2017, Boston, Mother Caroling Academy- Denella Clark
- March 21, 2017, U Mass Boston Center for Women in Politics and Public Policy, Equal Pay and Pay Equity-Nina Kimball
- March 27, 2017, Berkshire Community College, Berkshire County CSW Legislative Breakfast—Tahirah Amatul-Wadud
- March 28, 2017, Boston, Ladies Get Paid Boston Town Meeting- Jill Ashton
- March 28, 2017, Plymouth, First Parish Church, A Celebration of the Trans Community- Sara Schnorr
- March 28, 2017, Waltham, Salary.com on Equal Pay Act and Equal Pay- Nina Kimball
- April 10, 2017, Worcester, Worcester County Commission for the Status of Women, *Understanding Policy Writing/Making and How it Works- Mary Tuitt*
- April 27, 2017, Melrose, The Women's Commission in Melrose, Equal Pay Coalition Panel- Elizabeth Hart

Fourteenth Annual "Unsung Heroines of Massachusetts" Program

On June 21, 2017, the MCSW hosted its fourteenth Annual Unsung Heroine Celebration at the State House. This event honored more than 115 Heroines from cities and towns across the Commonwealth. The Unsung Heroines are women who, without fanfare or recognition, make the Commonwealth a better place to work and live.

The Commission partners with state legislators to identify women who perform significant acts of service on behalf of their communities. The nomination process identifies women of all ages, economic, political, geographic and ethnic backgrounds. All of the Unsung Heroine honorees were honored at a State House ceremony where they received appreciation from a grateful Commonwealth.

PROGRAMS, ADVOCACY AND EDUCATION

Sixth Annual Advocacy Day

On May 17, 2017 the MCSW hosted its Sixth Annual Advocacy Day at the State House. The public was invited to hear from state and regional commissioners, as well as elected officials regarding the status of women in Massachusetts and their access to equality and opportunities. Over 300 community members joined to visit with legislators and learn about the importance of considering gender when developing policy. We also shared our legislative progress and priorities including: insurance coverage of contraceptives, equality in disability insurance, paid family and medical leave, and fair scheduling.

International Women's Day 2017

On March 8, 2017, the MCSW hosted the annual International Women's Day Breakfast at Simmons College. The commission was proud to serve as a member, along with several partner organizations of the IWD planning board, in order to guarantee the success of the event. This year's breakfast specifically focused on women's pay equity, with an emphasis on moving women's wages forward, both locally and globally.

Equal Pay Day and Education Series

The purpose of Equal Pay Day is to raise awareness of the wage gap that exists between men and women. Equal Pay Day marks the day to which women must work in order to earn the same amount that their male colleagues made in the previous year. In 2017, it fell on April 4. Equal Pay Day also serves as a platform to advocate for our longtime legislative priority, An Act to Establish Equal Pay. On August 1, 2016 An Act to Establish Equal Pay was passed, making Massachusetts one of the first states in the U.S. to make this significant step forward toward closing gender wage gaps by helping to target discriminatory pay practices that depress women's wages. Among its most notable provisions, the Massachusetts law breaks new ground by limiting how employers can use salary history when making hiring or salary decisions.

Since its passing, MCSW, as head of the Equal Pay Coalition, has held a number of free educational panels, detailing the practical outcomes of this new law for employers, employees, and job seekers. These 2017 panels were located at Simmons College on January 26, UMass Boston's Center of Women in Politics and Public Policy on March 21, Salary.com offices on March 28, the Women's Fund of Western Massachusetts on April 6 and the Melrose Commission on the Status of Women on April 27. The Commission will continue to hold pay equity panels up until implementation of the Equal Pay legislation in July 2018.

Research

Per its enabling legislation the Commission is empowered to study, review, and report on the status of women in the Commonwealth, as well as advise executive and legislative bodies on the effect of proposed legislation on women. The MCSW is interested in research that examines and reports on the state of women's lives across the Commonwealth. In the past, we have partnered with various separate agencies that focus on this type of research. Over the course of the year, the Commission's staff utilizes information gathered from hearings to inform potential research topics, as well as the compilation of outside research.

MCSW Internship Program

Preparing the next generation of leaders remains an important component for the Commission. As an extension of this commitment MCSW offers internship opportunities to students from universities and colleges across the country. Internships, both for credit and non-credit, are extended during fall semester, spring semester, and through the summer. The Commission hosted 15 student interns this year. The program allows for a practical and substantive learning experience that guides and encourages women's leadership in government and public policy. For more information, or to apply, suitable candidates may visit our website: http://www.mass.gov/women/

LEGISLATIVE ACTIVITIES

As a part of its mission to provide an effective voice and advocate for the women of Massachusetts, the MCSW identifies priority bills, the center of our legislative focus and action. In the 2016-2017 year, the Commission focused on addressing women's economic security, political participation and protection from discrimination through the following legislation:

Priority Bills

An Act Advancing Contraceptive Coverage and Economic Security in Our State (ACCESS) (S499/H536)

This bill would expand health insurance coverage of contraceptives in the Commonwealth. Under this bill health insurance policies must cover: all FDA-approved prescription contraceptive drugs and devices or their therapeutically equivalent alternatives, all FDA-approved over-the-counter contraceptive drugs and devices, a 12-month supply of contraceptive drugs and devices in a single dispensation, voluntary sterilization procedures, and education and follow-up for any provided contraceptive drugs and devices. This will improve women's access to contraceptives throughout the Commonwealth.

An Act Establishing the Massachusetts Pregnant Workers Fairness Act (H3680)

This bill provides safeguards for employees with conditions of pregnancy, childbirth, and other related aspects. The bill requires 'reasonable accommodations' to be provided by the employer. These accommodations include but are not limited to: more or frequent breaks, time off to recover from childbirth, acquisition or modification of equipment, seating, temporary transfer to a less strenuous or hazardous position, job restructuring, light duty, break time and private non-bathroom space for expressing breast milk, assistance with manual labor, or modified work schedule.

An Act Establishing a Family and Medical Leave Insurance Program (\$1048/H2172)

This bill establishes employee rights to family medical leave or temporary disability leave in the event of the following: the birth of a child of the employee, the placement of a child with the employee for adoption or foster care, the necessity of an employee to care for a family member who has been diagnosed with a serious health condition for a period of time. Further, the bill safeguards the position, compensation, status, and benefits of the employee upon return from leave so long as ample notice to the employer is given.

An Act Establishing Three New Commissions on the Status of Women and Girls (S1119/H1110)

This bill would establish three new regional commissions on the status of women and girls: an Eastern Regional Commission, an Upper Middlesex Commission, and a Plymouth County Commission. The role of the regional commissions is to review the status of women in the communities and then make recommendations regarding policies and programs that would increase opportunities and equalities. The commissions are required to file an annual report on activities, findings, and recommendations. Members will serve three year terms in a volunteer capacity.

An Act Establishing Just Schedules for Employees (H3144)

This bill would establish employee rights to additional payment if they are not given sufficient advance notice of any changes to their work schedule. The bill specifies that if employers make changes to an employee's schedule within 10 days of a scheduled shift, they are required to pay between one and four additional hours of predictability pay, in addition to wages earned for hours worked. This bill will protect employees of the retail, fast food and hotel industries of the Commonwealth.

Priority Bills Continued

An Act Providing for Equitable Coverage in Disability Policies (\$545/H482)

This bill would end sex discrimination in disability insurance policies. Currently, state-regulated disability insurance is classified by sex, and filings at the Division of Insurance show different premiums for men and women with the same job classification. Based on filings between 2012 and 2015 with the Division of Insurance, women paid 25%-75% more than their male co-workers do for the same insurance. Passing this legislation would end this discrimination and would put disability insurance amongst the many other types of insurance that are legally barred from discriminating based on sex.

An Act Relative to Healthy Youth (S234/H2053)

This bill calls for age-appropriate and medically accurate sexual health education in each school district or public school that currently offers sexual health education. The bill promotes the benefits of abstinence and delay of sexual activity while also addressing the contraceptive and proper barrier methods to prevent unintended pregnancy and sexually transmitted infections. Further, the bill also establishes the need for a written policy of curriculum notification for parents and guardians of students receiving sexual health education in their native language.

An Act to Protect Girls from Female Genital Mutilation (S788/H2333)

Female genital mutilation (FGM) involves removing part or all of a girl's healthy sex organs and surrounding tissue for non-medical reasons resulting in health consequences, death in childbirth and lifelong trauma. This bill would create a program for education, prevention and outreach for communities that practice FGM, requires mandated reporters to make a 51A report to DCF if a child has suffered from physical or emotional injury resulting from FGM and criminalizes the acts of committing FGM on a child or taking a child in or out of the Commonwealth to commit FGM or to permit another to commit FGM.

REGIONAL AND LOCAL COMMISSIONS

Modeled after the MCSW, the eight unfunded county and regional women's commissions were legislatively created to study and report on the status of women and girls in their geographical areas, and to provide permanent and effective voices for women and girls. Each county and regional commission reports its findings annually to MCSW.

Once the legislation has passed to establish a county or regional commission, the MCSW solicits and reviews commissioner applications, makes appointments, hosts a formal inaugural event to have the new commissioners sworn in, and conducts an opening session. After the initial appointments have been made and the opening session conducted, the MCSW continues to offer significant support to the commissions and oversees the appointments and reappointments of commissioners. The MCSW frequently convenes with regional commissions in order to maintain strong partnerships and build the capacity of regional commissions.

This session, the Commission has endorsed proposed legislation to establish an Eastern Regional Commission, an Upper Middlesex Commission, and a Plymouth County Commission (see Legislation and Public Policy section). These new commissions would function in the same way as the existing county and regional women's commissions.

Current Regional Commissions

Berkshire County CSW - 9 members from Berkshire County, established in 2005

Bristol County CSW - 9 members from Bristol County, established in 2008

<u>Cape Cod and Islands CSW</u> - 13 total members from Barnstable, Dukes, and Nantucket Counties, established in 2009 <u>Essex County CSW</u> - 9 members from Essex County, established in 2010

Worcester County CSW - 9 members from Worcester County, established in 2013

<u>MetroWest CSW</u> - 9 members, representing the towns of Ashland, Bellingham, Dover, Framingham, Franklin, Holliston, Hopkinton, Hudson, Maynard, Medfield, Medway, Millis, Natick, Needham, Norfolk, Northborough, Norwood, Sherborn, Southborough, Stow, Sudbury, Walpole, Wayland, Wellesley, Westborough, Weston, and Wrentham, and the city of Marlborough, established in 2015

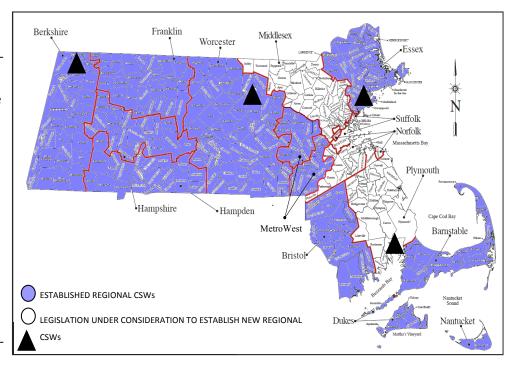
Hampden County CSW - 9 members from Hampden county, established in 2017

Hampshire/Franklin Counties CSW - 9 members from Hampshire and Franklin Counties established in 2017

Local Women's Commissions

There are currently ten local Women's Commissions that represent various cities and towns in the Commonwealth. While these Commissions are independent of MCSW, the Commission serves as a resource and partner for local commissions and maintains contact with them on a regular basis.

Local commissions include: Boston Women's Commission; Brockton Mayor's Commission on Women's Issues; Brookline Commission for Women; Cambridge Commission on the Status of Women; Melrose Commission on Women; Newton Commission on the Status of Women; Quincy



Mayor's Commission on Women; Somerville Commission for Women; Springfield Commission for Women; and Worcester City Manager's Advisory Committee on the Status of Women.



Berkshire County Commission on the Status of Women

BCCSW Vision: To be an effective, inclusive voice and vehicle for action for all women and girls of Berkshire County

ANNUAL REPORT 2017

Mission

The purpose of the Commission shall be to advance women toward full equity in all areas of life and to promote rights and opportunities for all women. The mission of the Berkshire County Commission on the Status of Women (BCCSW) is to provide a permanent, effective voice for women across Berkshire County that facilitates and fosters community and inclusiveness among women. The Commission stands for fundamental freedoms, basic human rights and the full enjoyment of life for all women throughout their lives.

Commissioners

Mary Berle, Secretary (Stockbridge, MA); Gillette Conner, Chair (Housatonic MA); Margaret Bradley Davis, Co-Chair (New Marlborough, MA); Lud Leonard (West Stockbridge, MA); Susan Olshuff, (Lenox, MA); Donna Todd Rivers (Pittsfield, MA); Gwendolyn VanSant (Great Barrington, MA)

BCCSW Focus

In 2017, BCCSW revisited its mission and the goals for engagement and how best to serve Berkshire County, building on the accomplishments and successes of the previous years. We were operating with a complement of seven of nine possible Commissioners with the goal to refine and clarify our mission within the larger political ecosystem and dialogue in which we find ourselves, especially as relates to challenges, topics, legislation, etc that affect women and girls.

Resulting from a particularly substantial dialogue in November with our outgoing Senator, Ben Downing, the Commissioners unanimously felt that we could play a role in facilitating and supporting civil discourse and in particular, putting a focus on increasing civic engagement. The issues and topics affecting women and girls are diverse and interwoven and the Commission feels that we can play a role in providing a platform and place for bringing topic experts, concerned citizens and policy makers together to explore the complexities and possible solutions to some of these issues in Berkshire County.

Legislative Breakfast

BCCSW hosted its annual legislative breakfast at Berkshire Community College on Monday, March 27th (agenda and save the date postcard attached). With the title "Inspire. Learn. Do.", we wanted to create an interactive gathering where participants would then commit to undertaking at least one action after leaving the breakfast. We were honored to have Tahirah Amatul-Wadud, Attorney and Commissioner for the Massachusetts Commission on the Status of Women, as our inspirational speaker. We then kicked off the interactive portion of the breakfast by sharing the 7 Norms of Collaboration, a tool that all participants could use to facilitate and engage in civic discourse and that could be practiced for the discussions at the tables as well.

Following the introduction of this tool, there were then concurrent table discussions covering three topics: Violence Against Women, Reproductive Health and Access, and Civic Engagement. These table discussions were facilitated by local citizens with particular expertise in the topic and were joined at several tables by some of our local legislators from the County.

There were over 100 attendees at the event and BCCSW will produce a summary of the table discussions that will be shared and that will also serve to identify topics for further exploration in future events.

Student Intern

The Berkshire Commission was fortunate to host a student intern from Miss Hall's School who contributed to the delivery of the legislative breakfast. Hosted by Multicultural Bridge as the sponsoring agency, she developed tip sheets (attached) on the topics covered at the breakfast providing a national, state and local summary of the status of the topics covered. Meant to spur engagement and not intended as an exhaustive or comprehensive treatment of the topics, these tip sheets were then provided to all participants at the breakfast to provide a brief overview of the issues and resources to explore.

Representation

- BCCSW was invited to participate at the Berkshire County gathering of the Women's March on Washington in January. We hosted a booth where attendees could take an oath to support the Constitution and to affirm their commitment to civic engagement. There were over 1500 people who attended and the Commissioners who attended had the chance to share the role and goals of BCCSW.
- BCCSW was invited to speak as part of one of WAM Theatre's productions in the fall of 2016. With the vision to create opportunity for women and girls through their mission of theatre as philanthropy, the Commission was honored to be invited by WAM Theatre to represent BCCSW.

Goals for 2017-2018

- Establish a fully operational Commission, which will create the stability needed to accomplish our mission and goals
 - Recruit for vacant Commissioner positions
 - Develop an expectations guide for interested candidates (akin to Essex County's efforts in 2015-2016)
- Facilitate ongoing collaboration with the MCSW and learn from the successes of other regional Commissions
- Develop a calendar of focused activities with full participation of all Commissioners

Submitted by Gillette Conner on May 16, 2017



Cape Cod & Islands Commission on the Status of Women Annual Report 2016

Cape Cod & Islands Commission on the Status of Women~Members

Debbie Bryant, Boume, Archivist
Susan Cushing, Pocasset
Katia Regina Dacunha, Hyannis
Marie Doubleday, Oak Bluffs: Vice Chair
Penelope Duby, Falmouth: Chair
Tina Games, Harwich
Susan Gardner, Falmouth: Recording Secretary
Laura Innis, Hatchville
Tracy Johnson, Brewster: Corresponding Secretary
Liz Rabideau, West Bamstable
Joan Walsh-Freedman, South Yarmouth: Treasurer
Marie Younger-Blackburn, Mashpee

Emerita Commissioners Helen Bresnahan, Pocasset Janet Joakim, Centerville

Purpose:

The Cape Cod and Islands Commission on the Status of Women was enacted by law and established in 2009 to advance women toward full equity in all areas of life and to promote rights and opportunities for all women.

The mission of the Cape Cod and Islands Commission on the Status of Women is to provide a permanent, effective voice for women across Barnstable, Dukes and Nantucket Counties that facilitates and fosters community and inclusiveness among women. The Commission stands for fundamental freedoms, basic human rights and the full enjoyment of life for all women throughout their lives.

The Commission is comprised of thirteen appointed women who have had prior experience working toward the improvement of the status of women. Commissioners are drawn from diverse racial, ethnic, religious, age, sexual orientation, and socio-economic backgrounds from throughout Cape Cod & the Islands. The Commission meets 10 (at least 6) times a year at the members' discretion.

Status:

During 2016, CCICSW adapted to changes both in organization and membership and experienced a rebuilding year in 2016, with a total of ten new commissioners being appointed. Two founding commissioners assumed emerita status. We elected a full slate of officers in October of 2016 and as we gradually added commissioners, we began by reviewing and revising our by-laws, application process and creating an emerita process. We spent considerable time with ethics training and open meeting law familiarization as we actively recruited new commissioners By January 2017, we had achieved a full complement of 13 commissioners, and currently have only 2 commissioners with more than one year's experience.

Activities:

- Commissioners attended the New England Women's Policy Institute Conference on November 18, 2016
- Commissioners held an Overview of both Massachusetts Advocacy and Legislative Process and the history of Commissions on the Status of Women on February 8, 2017 presented by Lauren Scribi, Executive Director of the Caucus of Women's Legislators and Marydith Truitt, MCSW
- Commissioners attended the MCSW Regional Hearing in Wareham on February 28, 2016
- Presentations about the Commission were made at the Cape Women's Coalition International Women's Day Breakfast March 10, the April meeting of the Cape Cod Women's Business Roundtable and a presentation on advocacy for the Cape Women's Coalition on May 4.
- Commissioners will attend the Investing in Girls Alliance for the 5th Annual Statewide Gathering on Girls on May 12, 2017.

We have agreed that our plan of action will begin in FY 18 and have spent time prioritizing legislation, creating a survey to be conducted across the Cape and Islands and reviewing our procedures. A Retreat was held on March 4 at the Falmouth Public Library led by Marydith Truitt where we explored ways to implement and support our mission. We established committee structure for:

- Finance: Joan Walsh-Freedman and Liz Rabideau;
- Programs: Tina Games, Laura Innis and Susan Cushing;
- Communications & Public Relations: Tracy Johnson, Debbie Bryant and Janet Joakim;
- Membership: Tina Games, Joan Walsh-Freedman, Katia Dacunha;
- Legislative: Susan Gardner, Helen Bresnahan, Marie Doubleday, and Katia Dacunha and
- o Outreach, Penelope Duby, Marie Doubleday and Laura Innis

Committee Actions:

Program Planning Committee, under the guidance of Tina Games is creating a survey to be administered both online and in hard copy across the Cape and Islands. We will reach out to social service agencies, community based nonprofit organizations, religious institutions, senior centers, and women's organizations hoping for a broad distribution of the survey. The results of the survey will be used as a support for planning our outreach, hearings and legislative priorities.

Finance Committee under the direction of Joan Walsh-Freedman is exploring the possibility to partner with another organization in order to create a 'Friends of CCICSW' Platform. A promising meeting was held on May 11 with the aim of creating a fund that could be used to support our mission.

Legislative Committee under the direction of Susan Gardner has reviewed the MCSW
Legislative Priorities and we have determined that the commission's choice of legislation of

Priority Legislation for the 2017-2018 General Legislative Session would include:

- S 499 Advancing Contraceptive Coverage and Economic Security in our State (ACCESS)
- S946/H.978 Housing Court Expansion
- S1048 Establishing a Family and Medical Leave Insurance Program
- S785/H2310 End Child Marriage in Massachusetts
- S1000 Establishing Just Schedules for Employees

Supported Legislation for the 2017-2018 General Legislative Session would include:

- S545.H482 Providing for Equitable Coverage in Disability Policies
- S788/HD2873 Protect Girls from Female Genital Mutilation
- S1023/H1048 Establishing a Massachusetts Pregnant Workers Fairness Act

We also identified the immediate opportunity to support legislation for Housing Court Expansion and wrote letters of support for the hearing on April 13, and letters to the President of the House of Representatives, and Chairs of the Joint Judiciary Committees, copied to all Cape & Islands Legislators, all of whom have supported the legislation. Ongoing letters of support and notices of hearings on the above bills will be shared with commissioners.

Community and Public Relations:

Under the leadership of Tracy Johnson, we have developed our 'elevator speech' format for our mission, purpose and tasks. We are in the process of reviewing upcoming meeting locations Cape & Island-wide for 2017-2018 in order to make our process available to a broader cross-section of the public. The committee is revising our webpage, and refining our online presence.

Outreach:

Members will attend Advocacy Day on May 17th. Commissioners will collect local contact information to expand our plans to partner with other women's groups on Cape & Islands to support women's engagement and disseminate information. So far, we plan to help encourage women to run for office through a programmed by Cape Cod Women for Change g well as a program on Women's Economic Empowerment with the Office of the Massachusetts Treasurer planned by SWIFT: Supporting Women in Financial Transition.

Goals:

- To better understand our constituency's concerns and needs through the survey and hearings.
- To create a mechanism for fundraising to support identified goals.
- To create opportunities to collaborate with other women's organizations and allies whose work is consistent with our mission across the Cape and Islands.
- To improve our outreach in diverse cultural and linguistic communities
- To promote the mission of the commission and continue creating strong working relationships with legislators.

Submitted: May 11, 2017



ESSEX COUNTY COMMISSION ON THE STATUS OF WOMEN

ANNUAL REPORT 2017

Mission

On August 3, 2010, former Governor Deval Patrick signed legislation establishing the Essex County Commission on the Status of Women (ECCSW) to advance the women of Essex County to full equality in all areas of life and to promote women's rights and responsibilities.

Commissioners

Sandy Almonte, Methuen
Paula Gomez Stordy, Middleton
Rebecca Hallowell, Vice Chair, Hamilton
Vilma Martinez-Dominguez, Lawrence
Heather McMann, Haverhill
Elsabel Rincon, Peabody
Sefatia Theken, Gloucester
Polly Titcomb Chair & Secretary, Swampscott

Emeritus Commissioners
Linda Anderson-Mercier, Beverly
Anne Ferguson (Co-Chair), Amesbury

Goals

This year, the ECCSW's goals included appointing new members to the Commission, holding a regional hearing, and conducting informational interviews to gather information about the status of women for this annual report.

Accomplishments

Membership

This year, two commissioners, Linda Anderson-Mercier and Anne Ferguson, reached their maximum years of service under the MCSW's bylaws, which required those commissioners to step down for at least one cycle of appointment. However, because of their significant and ongoing contributions to our commission, we were able to appoint them to "Emeritus" status, which is possible when one serves on the Commission for at least three years, with the support and approval of the MCSW. Therefore, while Linda and Anne can no longer vote as commissioners, they have been able to continue to attend our meetings and offer their skills and passion to the group.

Thanks to the efforts of the MCSW Regional Outreach Coordinator, Kelly Lynch, the ECCSW had several applicants to choose from in order to fill our four vacant seats (two of which were already vacant prior to Linda and Anne stepping down). The ECCSW has been extremely fortunate in being able to appoint three dedicated, intelligent, and accomplished women to our Commission: Heather McMann of Haverhill, Elsabel Rincon of Peabody, and Sefatia Theken of Gloucester. The ECCSW will appoint its last commissioner to our final open seat at our next meeting in June, 2017.

Heather McMann is Executive Director of Groundwork Lawrence. She has over 20 years' experience in the nonprofit sector focusing on building community and individual assets. Throughout her career she has worked to advance the status of women. Among other accomplishments, Heather has worked at Crittenton Hastings House's women's health clinic, the contracts manager for the Oshun Center, Haight Ashbury Free Clinics' 24-hour drop-in center for homeless and struggling low-income women and their families, Peace Games, Women Express/Teen Voices, and Youth Tech Entrepreneurs.

Elsabel Rincon is an experienced community organizer committed to civic engagement to advance the health, safety, and humanity of all. Elsabel is a skilled builder and leader of multidisciplinary teams and community development. In her community work, Elsabel has had a great deal of experience working with survivors of sexual assault and domestic violence, and immigrant communities. She has provided local, statewide, and national trainings on serving the immigrant and refugee communities.

Sefatia Romeo Theken is Mayor of the City of Gloucester. Among other impressive accomplishments in this professional role, Mayor Theken has volunteered her time for several years at the Gloucester Fisherman's Wives Association.

Legislative Outreach

This year, the ECCSW adopted the legislative priorities of the MCSW. More than half of the Commission will be in attendance at this year's Advocacy Day on May 17, 2017 in order to support the MCSW's effort in getting this important legislation passed.

Informational Interviews

The ECCSW conducted three informational interviews from those working on the "front lines" as a means to learn about some of the challenges facing Essex County women, children, and families. Summaries of these interviews are provided below in the section entitled "Findings."

Salem Hearing

The Essex County Commission partnered with the MCSW to co-host a Hearing at Salem State University on November 15, 2016.

Website

Commissioner Paula Gomez-Stordy worked hard this year to launch our first website. The content of the website includes, among other things, monthly meeting dates and agendas, upcoming events, bios of our commissioners, and our annual reports. The ECCSW is in the process of renewing our online presence for another year, and we look forward to increasing our activity on this relatively new site.

MCSW Collaboration

The ECCSW is grateful for the increased and ongoing collaboration with the MCSW. The Regional Outreach Coordinator, Kelly Lynch, and the MCSW Commissioner liaison to the ECCSW, Penny Blaisdell, have contributed to the productive alliance formed between our two commissions.

Findings

Informational Interviews

Elane Lee, Co-Director of Greater Lawrence Family Health Care ("GLFHC")

- 5 major reasons for homelessness:
 - Medical homelessness (e.g. getting injured at work leads to chronic pain, which leads to the inability to work, which leads to loss of housing);
 - True economic homelessness (e.g. not enough affordable housing units and not enough jobs for the educational level of the population);
 - Domestic Violence
 - 69% of women who are homeless have been raped or had trauma in their background (69% of domestic violence victims report childhood sexual abuse)
 - Often battered families have nowhere to go; victims often face the choice of being housed and fed but battered or homeless and poor with children
 - Women who were abused in childhood are 15 times more likely to abuse alcohol and 9 times more likely to have a substance use disorder.

- More women do drugs than abuse alcohol (it is more socially acceptable for men to be drinking; also, drinking is harder to hide from children)
- Addiction is a popular way to control women; it makes her dependent, ashamed, unable to leave (addicted, also afraid abuser will inform authorities of her substance abuse and she will lose her children)
- There are lots of 12 step programs for substance abuse but few for batterers (batterers anonymous has a couple of chapters).

Substance use

- Alcohol and substance use disorder are both the cause and effect of homelessness.
- Homeless individuals often need a clean drug test to get into more stable shelters/housing, which requires access to treatment programs.
- Treatment requires, among other things, an address, access to insurance, transportation, and the ability to make co-pays, which homeless people generally do not have

Mental illness

 Strong connection between homelessness, mental illness, and substance abuse

Other Important Considerations:

- Studies show that having traumatic experiences prior to the age 18 have a negative impact on physical, mental and emotional health
 - This stress causes instinctual fight-or-flight responses, which
 physically damage the developing brain and lead to inflammatory
 changes that increase the potential for many disease states,
 including physical illness, mental illness, being prone to causing
 future violence, and being a victim of future violence
- 40% of homeless youth identify as LGBTO
 - Many have been kicked out of their home due to gender issues.
 - They have been exposed to higher levels of physical and sexual abuse from caretakers
 - These kids are also exposed to greater victimization while homeless than straight peers.
 - Homeless lesbian youth are more likely to experience PTSD, alcohol and substance use disease than straight homeless girls.
 - LGBTQ are more likely to attempt suicide (62%) than homeless straight peers (29%)

Best Practices:

- Trauma-informed approaches: GLFHC realizes that marginalized populations cannot afford health care, and/or do not have the mental health capacity (due to trauma or substance use) to appear at a medical facility when necessary
- o Meet the population where they are:

- GLFHC has mobile health units: sends team to 11 shelters and food pantries in Haverhill and Lawrence weekly for medical visits, free of charge
- Help individuals obtain what they need to get insured (e.g. birth certificate)
- o Grants that help defray the co-pay for prescription medications
- Deliver medications to some of the overnight shelters.
- o Bi-weekly psychiatric injections and weekly injections for sobriety
 - This will help stabilize the population, which might then be able to secure a job and obtain housing

Jess Andors, Lawrence Community Works ("LCW")

- Priorities:
 - o People:
 - To build community through revitalization
 - Educating people on financial responsibility, home ownership, starting businesses, going back to school, taking English classes
 - · Helping immigrants get acclimated
 - Social capital building
 - · Parents/school engagement
 - Place: Real estate development; neighborhood development strategy; large-scale adaptive reuse of mill buildings; truly affordable housing
 - Systems Change:
 - Employment
 - · Providing employment coaching
 - Addressing health care issues, child care issues, transportation issues, housing issues
 - Language: Stress the importance of hiring Spanishspeaking workforce
 - Training individuals for upward mobility: Training from entry-level jobs to more advanced positions
 - Schools:
 - · Changing culture of family engagement in schools
 - Structuring schools so that they are a resource for families and a hub for community and information
- · Example of LCW Real Estate Development Model:
 - LCW just opened a 73-unit housing building
 - Over 500 <u>qualified</u> applicants (over 1,000 people applied)
 - Of the 500 applications, over 80% applied for the lower-cost units, which only comprises 30% of the units;
 - There was a much smaller pool for the remaining 60% units, which cost more (3 bedroom = \$1,100/month)
 - Having more housing on lower end of the spectrum is a big need
 - LCW doesn't require first and last month rent, which makes it more accessible to folks; but they do require a security deposit
- · Issues/Challenges/Barriers Facing the Women They Serve:

o Housing:

- Women-headed households make less money, so they cannot afford quality or secure housing
- Quality of housing is poor; this creates health issues
- Lack of reliable heat/air conditioning/plumbing/etc.
- Inadequate Supply:
 - Population in Lawrence has grown 22%, but housing has only grown 2%
 - o This results in very high rental prices
 - Over 40% are paying over half of their incomes in rent
 - Less than 20% of housing stock is for single-family housing, which primarily affects women
 - Communities are not fulfilling their share of affordable housing

o Low Income:

- Lawrence has lowest income per capita than anywhere in the state
- Only 30% of the jobs in Lawrence are being filled by residents
 - Higher wage jobs are filled by out-of-town people
 - · Residents have to commute for lower-wage jobs
 - Regional transportation is inadequate/ underresourced
 - o Need to build housing near transportation
 - Only 30% of residents own cars
- Affordable Housing Is Generally Still Not Affordable:
 - State law defines what is "affordable" based on area median income
 - . In Lawrence, this includes Methuen, Andover, and N. Andover
 - With these towns included in the calculation, the new housing ends up being affordable only for a middle class family
- Women/Individuals who do not earn enough want to qualify for affordable housing, which, on average, is still too expensive for most single-family homes; so this is a disincentive to try to work full time because it would mean your rent would go up or that you would lose a lot of your benefits (the "cliff effect")
- Best Practices To Help Women Overcome Economic Barriers:
 - Stronger enforcement of the existing building codes
 - Investing more in childcare would be a huge housing help because women would then be freed up to work more hours/have more money left over for basic needs
 - o Flexibility in work schedules to meet childcare/family needs
 - Poverty-Breaking Programs:
 - Example: <u>Individual Development Account</u>:
 - · At or below 200% of federal poverty levels to qualify;
 - must have earned income;
 - must be saving for house, business, or education;

- If these requirements are met, they will match your income 300% (up to a certain amount) for the purchase of a house
- These models help people get out of poverty
 - It is the equivalent to having parental help in a middle class household
- Can't just give housing or one resource for people; have to give people overall education/support because it's all interrelated
- IDA programs could also be created for investment cars, debt management, schooling, and other investments

Mickey Northcutt, CEO, North Shore Community Development Coalition ("NSCDC")

- Mission: NSCDC invests in neighborhoods to create thriving communities through a variety of projects/programs designed to improve quality of life and create empowerment in low-income neighborhoods
- Process:
 - Real Estate Development: NSCDC buys the building and creates housing
 - Affordable Housing: NSCDC rents the units at affordable costs
 - NSCDC provides "low-cost housing" (60% median income)
 - Quarter of units reserved for those at 30% or below median income
 - Reinvest in Neighborhood: NSCDC reinvests their profits in neighborhood revitalization projects, community-based programs
 - Engage local community to determine what the community needs;
 - · Create Neighborhood Master Plan
 - Vast majority of those in their programs are not those in residences
 - NSCDC earns its money through real estate, which earns more than it costs; it then reinvests those earnings in community development, which costs much more than it earns
- Who Qualifies:
 - o Examples:
 - Single adult: \$20,800/year (\$10/hr FT)
 - Family of 4 with 2 kids: \$57,200/year (\$20/hr FT, \$12/hr PT [25 hours])
 - Single parent with one child: \$32,000/year (Salaried FT teacher's aide)
 - Single parent with two children: \$50,000/year (\$23/hr FT)
 - Flat rent per tier, not by size of household
 - 1 bedroom: \$850-900 (including heat and hot water)
 - 2 bedroom: \$1,100 (including heat and hot water)
 - 3 bedroom: \$1,250-1,300 (including heat and hot water)
- Barriers Facing Women/Families
 - Overwhelming demand for affordable housing is for families
 - 2/3 families are single parents; 80% are women-led households
 - Lack of childcare and affordable childcare, which disproportionately falls on single mothers
 - Not enough Community Development to help people get out of cycle of poverty
 - NSCDC creates these programs, which include:

- ESL programs;
- · free tax prep program;
- Resolving voting access issues:
- Creation of more youth programs (there is a serious lack on the North Shore), primarily for young adults who are not finishing high school who are low-income, at risk youth
- Creation of community centers with classrooms;
- Healthy cooking classes;
- Immigration clinics;
- Council on aging (dominos club, dance class, yoga classes)

Salem Hearing

The Essex County Commission partnered with the MCSW to co-host a Hearing at Salem State University on November 15, 2016. In order to elicit the maximum amount of testimony, the ECCSW created a Questionnaire (provided in English, Spanish and Portuguese) for those in attendance to submit to us in addition to or in lieu of offering oral testimony. Attached please find a summary of our Findings from the Salem hearing as well as copies of the Questionnaires submitted to us by members of the public.

Statistical Data

The following statistics have been drafted and generously provided by commissioner, Rebecca Hallowell, through her active role in The Women's Fund of Essex County¹:

Demographics:

- · Females are 52% of total population
- · 57% of the 65+ population is female
- · Age Distribution of Females:
 - o < 18: 21%
 - o 18-34: 20%
 - o 35-64: 41%
 - o 65+: 18%
- Median female age is 42.5 years

Marital Status of Females (Ages 15+)

- · 31% Never married
- 46% Now married (except separated)
- 2% Separated
- 12% Divorced
- 9% Widowed

¹The Women's Fund of Essex County, Feb. 2017 based on 2014 American Community Survey released September 2016. See Attached.

Childbirth & Marriage

 31% of women who gave birth in past 12 months were unmarried (compare to 31% in 2014 and 38% in 2013)

Place of Birth

- 84% Native born
- 16% Foreign born (of foreign born, 55% are naturalized citizens)

Households:

- Overall Female Householders²
 - o 13% of all households
 - o 19% of all families
- · Latina or Hispanic Female Householder Families
 - o 39% of all female householder families
 - 44% of all Latino families
- · Black or African American Female Householder Families
 - o 6% of all female householder families
 - o 35% of all Black or African American (alone) Families: 35%
- Asian Female Householder Families:
 - o 3% of all female householder families
 - o 15% of all Asian families

Total Families with Own Children3

- Overall Female householder with their own children:
 - 58% of female householder families
 - o 26% of all families with children
- Latina or Hispanic Female Householder Families
 - o 53% of all female householder families
 - o 35% of Latino families
- · Black or African American (alone) Female Householder Families
 - o 7% of all female householder families
 - 23% of all Black or African American Families

Average Family Size

Married Couple: 3.3 people
Male Householder: 2.9 people
Female Householder: 3.2 people

Households which Own Their Own Home vs. Rent

- 64% of all families own: 36% rent
- 39% of all female householders; 61% rent
 - o Females Ages 35-64: 56% rent
 - o Females Ages 65+: 27% rent

² Householder = Head of Household

³ Children include those who are related and who are under 18 years of age.

Median Family Income

- \$35,183 Female Householder families (compare with \$53,250 for Male Householder families)
- \$25,530 Female Householder families with children (compare with \$43,258 for Male Householder families)

Women & Poverty: Generally

- 59% of the population living below the poverty level (100% of Poverty Level) are women and girls
 - o 26% are Female Householder families
 - 67% of Female Householder families are single mothers with children; 37% are below the poverty line
 - 33% are Female Householder families without children; 6% are below the poverty line
- 60% of the "poorest poor" (50% of poverty level) are women and girls
- 59% of the population living below 125% of the poverty level are women and girls

Women, Poverty & Race/Ethnicity (single race/ethnicity)

- Highest total number of women in poverty are white women
- Highest rates of poverty are: Latina women (28.5%), Black Women (27.7%)

Children in Families Living Below the Poverty Level

- · 17% of all children in families
- Of all children who live in poverty, 69% live in Female Householder families

Public Assistance in Last 12 Months (SSI, cash, &/ or Food Stamps/SNAP benefits)

 60% of children in Female Householder families (compare with 37% of those in Male Householder families)

Percentage of Female Householder Families (With Children <18) Living below Poverty Level by Nativity

Total: 36.6%
Native: 34.3%

Foreign Born: 41.6%

Naturalized: 26.4%

Non-Citizen: 61.2%

Families by Race & Ethnic Origin by Poverty

- · White:
 - o 52% of Female Householder Families
 - o 17% live below poverty line
- Black:
 - o 6% of Female Householder Families
 - o 34% live below poverty line
- Asian:

- o 3% of Female Householder Families
- o 11% live below poverty line
- Hispanic/Latino/a
 - o 39% of Female Householder Families
 - o 39% live below poverty line

Median Earnings for Full-Time, Year-Round Workers

- · On average, Females earn 79% of what Males do
- Native born Females earn 83% compared to their Male counterparts
- Foreign Born/Naturalized Female citizens make 65% compared to their Males counterparts
- Foreign Born/Non-Citizen Females make 40% compared to Men's average median earnings

Work Hours Per Week (Ages 16-64)

- 35+ Hours/Week: 49% females (68% males)
- 15-24 Hours/Week: 22% females (13% males)
- 1-4 Hours/Week: 6% females (3% males)
- Did Not Work: 23% females (16% males)

Mean Hours Worked Per Week

Females: 34
 Males: 40

Summary of Educational Attainment and Poverty Rate by Head of Household

	Bachelor's Degree or Higher	Some College	High School Degree	< High School Degree	HS Degree or Less	Overall Poverty Rate
Female Householders	20%	32%	29%	19%	48%	26%

Female Households & Single Mothers in Poverty in Essex County

City	Female Householders		Single Mothers with Related Children < 18		Single Mothers in Poverty	
	Total	% of Families	Total	% of Female Householders	Total	% in Poverty
Essex County	36,666	19%	21,424	58%	8,927	37%
Lynn	5,952	29%	3,811	64%	1,863	49%
Lawrence	7,717	46%	5,900	76%	2,880	49%
Haverhill	3,743	25%	2,579	69%	980	38%
Peabody	2,373	18%	1,318	56%	369	28%
Methuen	2,514	20%	1,674	67%	496	30%
Salem	2,769	28%	1,843	67%	637	35%
Gloucester	1,255	16%	786	63%	175	22%

Beverly	1,690	18%	1,008	60%	233	23%
Amesbury	750	17%	475	63%	94	20%
NBPT	664	15%	356	54%	70	20%

Poverty Rate for Population Ages 25+ by Educational Attainment

City	< HS Degree	HS Degree or Equal	Some College or Associates	Bachelor's or Higher
Lawrence	36.0%	29.9%	17.7%	26.1%
Lynn	36.6%	11.0%	20.9%	6.8%
Salem	41.2%	18.3%	14.5%	6.3%
Haverhill	29.7%	12.7%	8.8%	4.3%
Methuen	28.5%	11.8%	7.9%	3.6%
Peabody	23.9%	13.0%	8.1%	4.6%

Female Householder Housing Tenure

City	Female Householder Housing Tenure					
	% Owner Occupied	% Renter Occupied				
Lawrence	17%	83%				
Lynn	27%	73%				
Salem	32%	68%				
Haverhill	37%	63%				
Methuen	48%	52%				
Peabody	54%	46%				

Conclusions

Housing:

- The cost of housing is a leading barrier preventing women in Essex County from improving their economic status and quality of life
- The lack of affordable housing options requires a disproportionate number of female-lead households to spend nearly half of their income on rent
 - This issue is compounded by the cost of childcare and their financial responsibilities to their child(ren)
- Affordable Housing Is Generally Still Not Affordable:
 - State law defines what is "affordable" based on area median income.
 - In Lawrence, this includes Methuen, Andover, and N. Andover
 - With these towns included in the calculation, the new housing often ends up being affordable only for a middle class family
- Women who are close to earning enough to be disqualified from affordable housing may not seek additional work for this reason; this is a disincentive for individuals to try to work full time or earn more because it means increased rent and/or a loss of benefits

- There are a lack of programs to assist individuals in purchasing a home in order to build their "asset wealth" (i.e. a financial safety net) instead of being forced to rent for the foreseeable future
 - This issue disproportionately affects women because more women rent housing than men; they receive lower average incomes than men on average; and they are disproportionately raising dependent children as a single parent
- While programs like NSCDC are wonderful assets to the Essex County Community in that they provide affordable rental housing and community development to marginalized populations, it is not structured to address the crisis of a lack of affordable home ownership options in the County
 - The non-profit affordable rental housing model is not necessarily setting people up to succeed/have upward mobility, which is ultimately what breaks the cycle of poverty
 - The State does not provide funding to non-profits to build affordable housing for ownership; non-profits are constrained by what kind of funding they can get, and it is currently structured for them to become landlords
- Greater Need for Poverty-Breaking Programs:
 - o Example: Individual Development Account
 - Individuals must: be at or below 200% of federal poverty levels to qualify; be earning income; be saving for house, business, or education
 - If these requirements are met, the agency will match your income by 300% (up to a certain amount) for the purchase of a house, educational loan, etc.
 - This assistance, which is the equivalent to having parental help in a middle class household, helps people break the cycle of poverty by providing assistance to building asset wealth
 - Agencies cannot just give housing or another resource for individuals in need because their barriers to upward mobility are all interrelated
 - Must offer support for childcare, education, etc.
 - IDA programs should be created not just for housing, but for cars, debt management, schooling, and other investments
- Increase Community-Based Programs
 - NSCDC provides an excellent model for building more community-based programs – they hold meetings with the residences of the towns they are building in to become informed on what kinds of services are needed in the neighborhood/town/city
 - 2/3 of their renters are single family households, and 80% of those are led by women; therefore, their affordable housing model is disproportionately benefiting women and their dependent children, not only because of the housing they provide, but also the services they provide to those neighborhoods, including cooking classes, assistance with tax preparation, youth programs for teens who have not completed high school (which have 100% success rate)

 These types of programs (and the affordable housing projects that make them possible) offer women opportunities to improve the status of their lives by providing free services to them, and the public at large

Domestic Violence

- Domestic violence remains a major concern in Essex County, as well as across the state and nationally
- Domestic violence greatly increases homelessness and substance abuse and substance dependence in women, and creates a vicious cycle in which women feel trapped
 - On average, a woman tries to leave an abuser 7 times before she actually succeeds in moving out for good
- Essex County should provide 12-step programs for batterers in the same way we do for those suffering from substance abuse; Batterers Anonymous has a few chapters, but is not a part of our social fabric like, for example, AA

Higher Education Support

- Young women today are attending community college, college and graduate schools at higher rates than they have attended previously (as well as at higher rates than young men)
- Support in the form of childcare services and other economic assistance would help women complete their education in the short term, and in the long term it would greatly increase their chance for upward mobility and economic stability over the course of their lives
- Increase The "Trauma-Based" Approach To Providing Assistance
 - o Individuals who are victims of domestic violence, suffer from mental illness, and/or are homeless, are substantially more likely to have experienced early childhood and/or adulthood traumas that impact their ability to seek out the assistance they need to break their cycle of suffering; we cannot expect such populations to have the mental and/or emotional capacity to fit into the framework of "regular" society that is functional for most people
 - As a result, we need more programs like the ones offered by GLFHC – where we meet the population where they are, and where we do not expect them to come seek help
 - Example: include mobile hospital service vans that go to areas where homeless people gather/live to provide free services
- Increase Funding For Addiction Treatment & Mental Health Facilities
 - Programs like Gloucester's "Angel" Program where, when an addict comes into the Gloucester Police station and asks for help, an officer will take him/her to a local hospital, where they will be paired with someone to guide them through the process of recovery; they will not be arrested, charged with a crime, or jailed
- · Gender Inequality Affects Women's Upward Mobility
 - Women's median earnings are lower than men's across every sector (including public sectors)
 - Occupations in which women are the majority of workers tend to be the lower or lowest paying occupations for women

- Although a small percentage of the occupation, women's salaries have jumped significantly in Protective Services as well as Natural Resources, Construction & Maintenance (especially Installation, Repair & Maintenance), probably as a result of union wage comparability and affirmative hiring.
- On average, women worked fewer weeks and/or fewer hours per week than men
 - This may be because child care and/or parent care issues, which fall disproportionately on women; lack of available work; inadequate schooling/training (often because of being a single mother); or choice

Goals for 2016-2017

- Continue to become a more fully operational Commission, which will create the stability needed to accomplish our mission and goals
- Advocate our legislative priorities to elected officials and other lobbying groups; potentially organizing a legislative breakfast
- Interview local non-profits to become better informed about the most pressing issues facing women in Essex County; get testimony through these organizations
- Become a better and more effective bridge for local organizations studying women's issues/advocating for positive change in their Essex County communities. Ways to accomplish this goal include:
 - o informing them about our legislative priorities;
 - o linking them to other local organizations;
 - o assisting with and attending their hearings/educational forums; and
 - distributing their information to local legislators/other activist groups to help spread the data on the status of women in Essex County
- Inform leaders of business, education, healthcare, municipalities and communications media on issues pertaining to women in Essex County
- Write Op-Eds in various local papers
- Facilitate ongoing collaboration with the MCSW and increased collaboration with other regional Commissions
- Continue to study and report on the status of women in Essex County

Submitted by Polly Titcomb on May 11, 2017



Hampshire- Franklin Commission on the Status of Women and Girls



Annual Report June 2017

Commissioners

Denise Brown (Northampton)

Ginetta Candelario (Northampton)

Linda-Jeanne Mack (Easthampton)

Bonnie MacCracken (Amherst)

Keleigh Pereira (Turners Falls)

Marcia Plant Jackson (Leverett)

Chelsea Sunday Kline (Northampton)

Francia Wisnewski (Montague)

Anais Surkin (Appointed, sworn in pending) (Greenfield)

The following were nominated and elected as temporary officers:

Francia Wisnewski ~ Chair

Denise Brown ~ Vice Chair

Linda-Jeanne Mack ~ Clerk

Bonnie MacCracken ~ Treasurer



Hampshire- Franklin Commission on the Status of Women and Girls

April

April 25th, 2017

Sworn in ceremony at South Hadley Public Library

Decisions made:

Francia Wisnewski was appointed as the acting commission chair.

Denise Brown was appointed as the acting commission vice chair.

Linda-Jeanne Mack was appointed as the acting commission clerk.

Bonnie MacCracken was appointed as the acting treasurer.

As this was the first meeting of the commission, it was decided to elect members as acting positions versus permanent positions. The Commission decided that these positions would be temporary and would be officially voted on after the Commission had met for official meetings.

It was decided that bylaws for the commission would be decided at the first regularly scheduled meeting.

May

May 18 th, 2017

Hosted our first meeting at the Bangs Community Center – Amherst, MA May 18th from 6-8pm

Discussion regarding other commission best practices on meeting planning. Decision was made to set meetings in advance for the year. Ginetta Candelario led an exercise for each commissioner to suggest goals, ideas or potential accomplishments for the first year. Suggestions included:

- a resource guide for girl-centered programs,
- expanding statewide leadership, support and empowerment
- a website and Facebook page
- LIPPI awareness
- knowledge about the commission
- running public policy groups



Hampshire- Franklin Commission on the Status of Women and Girls

- conducting studies (like intercept mapping or conducting focus groups)
- engaging constituents in reference to the needs of women and girls
- connect with other commissions to learn best practices and build capacity
- community breakfast (like Berkshire County commission)
- joint meeting with commissioners in Hampden County on a regular basis (3-4 times per year?)
- engaging Latino/a community
- data gathering
- applying for funding together with other commissions, not to compete but to collaborate
- branding
 - o creating logo
 - o banner
 - business cards
 - name tags
- outreach and visibility
 - participate in Pride
 - o other community events
- inviting women from the community to be present
- being careful that we're not speaking for people
- engaging young girls
- youth leadership programs
- a girls advisory board
- keeping area strong for girls
- ensuring that women and girls of color in the community are involved
 - what are their needs
 - Denise Brown has potential plans she'd like to propose in the future to help advance this cause

A mission statement needs to be decided that goes with the mission statement of the Massachusetts Commission on the Status of Women and Girls.

A retreat will be scheduled to help solidify who will have what roles and responsibilities and to complete bylaws.

Dates were scheduled for the coming months and each commissioner was assigned a meeting date to be responsible for. The meetings will rotate between Hampshire and Franklin counties bi-monthly.

Chelsea created a Google calendar of the events.



Meeting dates: 6/26/17, 7/24/17, 9/25/17, 10/23/17, 11/27/17, 1/22/17, 2/26/17, 3/26/17, 4/23/17 and 5/21/17.

A decision was made to skip the months of August and December.

The half-day retreat was scheduled for 9/16/17 from 9am-1pm to solidify roles and responsibilities and to complete bylaws.

Responsibility for working on bylaws were split up amongst commissioners to do independently or in teams.

Budgeting was discussed. Bonnie will do more research on how and where funds can be kept.

Decision to create individual gmail accounts for each commissioner set up as first initial.last namehfcswa@gmail.com.

Next meeting will include:

- Branding
 - Business cards
 - Nametags
 - Banners
 - o Logo
- Report out on the girls forum and advocacy day
- Update on missing member Anais
- LJ to create email example and signature
- Chelsea to send links to calendars and create facebook page

Chair will take on sending out the meeting announcements for the next three meetings until the retreat occurs.

Certificate of Receipt of Open Meeting Law Materials were provided to clerk to send to Kelley Lynch.



May 17th, 2017

5th Annual Statewide gathering on the Status of Girls

Commissioners Candelario, Sunday Kline and MacCracken attended the 5th Annual Statewide gathering on the Status of Girls in Sturbridge MA,hosted by Investing in Girls Alliance- IIGA.

This year's gathering focused on the collective impact work in the following areas:

- Engaging women's commissions
- Engaging men
- Engaging the next generation of leaders
- New Study by the Girl Scouts Eastern Mass/Simmons College: Dreaming Big What Confidence Has To Do With It
- How to accomplish this in today's challenging environment

In support of our long term sustainability work, this year participants were encouraged you to bring a current/emerging young leader who is invested in girls and wants the opportunity to learn more.

May 20th, 2017 Women's Advocacy Day State House

Six Commissioners of the Hampshire-Franklin Commission on the Status of Women of Girls (HFCSWG) attend MCSW Advocacy Day 2017 on May 17th. Their purpose for attending was to stand in support of women and girls of their region and throughout Massachusetts, as well as to support Francia Vieda Wisnewski, Acting Chair of the HFCSWG, who spoke about the reasons for why she pursued becoming a Commissioner as she introduced one of MCSW's priority legislation, An Act Establishing Three New Commissions on the Status of Women and Girls (S. 1119) before those in attendance. Commissioner Wisnewski's statement in support of S. 1119:



" I am honored to be here with all of you. I am a daughter, sister, mother, wife, neighbor and friend; of Montague in Western Mass, immigrant from Colombia and representing the Hampshire Franklin Commission on the Status of Women and Girls.

I have experienced firsthand the limitations of living in a rural community, raising a family, at some point, under income, relying on support from the State's system, trying hard to overcome these barriers. Thankfully, I had supports and a village of people that helped my family to be in a better place, this happened in a time in which these service was accessible and available at a critical time in our lives.

In my professional world, I have and had great opportunities to interact, support and help women from diverse backgrounds to find their strength and their voices. Franklin County has the high population of poverty in the state, many of my friends, coworkers and neighbors are women struggling to meet ends, living incidences of domestic violence, working hard to find a sense of purpose, to live with dignity and to be role models for their families. Many of these women are single parents, head of household, living in the lower income bracket. Many of these women would like to go back to school and increase their odds in the workforce, but their circumstances don't allow a financial capacity to afford education, safe housing, neither access to quality childcare or basic medical care without the worries of high deductibles or expensive medication or just access to reproductive health. It's easy to be caught in a never ending cycle.

As citizens of the commonwealth, it's critical to constantly advocate for women's rights, to visit legislators and ask to keep supporting bills that will made life for women, fair and equitable.

Speaker DeLeo quoted the MWPC website: "Currently, just 12 of 40 Massachusetts state senators and just 38 of 160 state representatives are women. Total, just 50 out of 200 state legislators are women, or 25.0%. This means we rank 24th in the country in terms of the percentage of women in state legislature.", He also mentioned that 80% of the leadership in legislation is behind women, this is pretty exciting.

I appreciate my fellow commissioner, Bonnie MacCracken's, passion and efforts in establishing our Hampshire-Franklin Commission, that is why I am here before you today, I am paying it forward, so that the women of the Eastern Region, Upper Middlesex, and Plymouth County can benefit from having their voices heard.

I am presenting Bill Barber Docket Numbers: S1119 in the Senate and H1110 in the House
An Act Establishing Three New Commissions on the Status of Women and Girls
Lead Sponsors: Senator Brady, Senator DeMacedo, Representative Poirier and Representative Barber
•The Commission supports and is invested in the further establishment of county and regional
commissions on the status of women.

- •An Act Establishing Three New Commissions on the Status of Women and Girls would allow further commissions to be created in the same model as the MCSW, and the six existing county and regional commissions.
- ·The role of the regional commissions is to review the status of women in the communities and then make recommendations regarding policies and programs that would increase opportunities and equalities.
- ·The creation of the Eastern Regional Commission, an Upper Middlesex Commission, and a Plymouth County Commission is consistent with the Commission's goal of increasing women's political participation in the Commonwealth.

I am humbled by how our efforts, as commissioners and how our collective voices could impact change for future generation of women in the commonwealth. By encouraging women to participate in their



community, these bills will foster a greater sense of involvement and inspire future generations of women leaders here in MA."

The HFCSWG Commissioners divided into several groups and scattered across the State House to lobby their representatives and senators, and other members of the Western Massachusetts delegation, to gain their support of MCSW's priority legislation that is comprised of eight bills. Advocacy Day also allowed the HFCSWG Commissioners the opportunity to begin building a network and forming partnerships with their legislators, their legislators' aides, local advocates from their region, and Commissioners from other regional commissions, especially with Hampden and Berkshire County.

From this experience, HFCSWG Commissioners strengthen their advocacy and lobbying skills to be an effective voice for impacting change for women and girls; learned about available resources and maneuvering the legislative process; and most importantly building their own sisterhood and learning about each other.

May 20th, 2017 Semi- annual Regional Commission Meeting Women's Political Caucus Office

Commissioner Brown, Mack, MacCracken, Sunday Kline, Perreira, Wisnewski attended the Semi- annual Regional Commission Meeting, participating in the following topics:

- Questions regarding the Open Meeting Law, a helpful guide from the Attorney General's office and meetings in general.
- Access to a contact list for the leadership of each regional commission.
 Networking opportunities with other Commissioners.
- Expressed interest in a dedicated web page hosted by the MCSW's website.

May 30th, 2017



OML Training

Commissioners MacCracken and Wisnewski participated in the Open Meeting Law Regional Training at Holyoke Senior Center, facilitated by the staff from the office of the Massachusetts Attorney General. The goal of the meeting was to to promote openness and transparency in government. Information presented included clarification of procedures, diversity of questions and general educational outreach about the law's requirements. "The Open Meeting Law requires that most meetings of public bodies be held in public, and it establishes rules that public bodies must follow in the creation and maintenance of records relating to those meetings".

http://www.mass.gov/ago/docs/government/oml/oml-guide.pdf

Respectfully submitted by Francia Wisnewski, Chair.

Hampden Commission on the Status of Women

Dawn Forbes DiStefano Michelle Goncalves Jacqueline Griswold Patricia Hallberg Jennifer Metsch Ellen Moorhouse Nicole Murray Arlene Rodriguez Shanique Spalding

ANNUAL REPORT

June 2017

Members:

Dawn Forbes DiStefano—West Springfield
Michelle Goncalves—Ludlow
Jacqueline Griswold—East Longmeadow
Patricia Hallbert—Wilbraham
Jennifer Metsch—Longmeadow
Ellen Moorhouse—Springfield
Nicole Murray—Agawam
Arlene Rodriguez—Springfield
Shanique Spaulding—Springfield

Elected Officers:

Nicole Murray—Chair Shanique Spaulding—Vice Chair Jacqueline Griswold—Secretary

Purpose:

On April 25, 2017, the Massachusetts Commission on the Status of Women inaugurated nine new commissioners to a newly formed regional commission created to study and report on the status of women and girls in the twenty-three towns/cities that make up Hampden County, Western Massachusetts. "The Massachusetts Commission on the Status of Women is a state-established body charged with reviewing the status of women in Massachusetts and offering recommendations regarding policy that would improve access to opportunities and equality." Taking from the brief provided, the Regional Commissions: "Modeled after the MCSW, the...unfunded county and regional women's commissions were legislatively created to study and report on the status of women and girls in their geographical areas, and to provide permanent and effective voices for women and girls. Each county and regional commission reports their findings annually to MCSW."

Membership:

The entire commission was sworn in at the end of April, and our first meeting was held on May 11, 2017. We had our second meeting on June 15, 2017. Over the two meetings, we have nominated and elected officers, established our calendar, and went over future events to begin getting to work. We have

begun to set up task groups to target certain aspects: social media, legislative, program planning. We have also begun the process of figuring out how to incorporate such groups into break-out sessions during our meetings. We have discussed reaching out to other more established commissions as to what they found most helpful at the beginning.

Accomplishments:

Already we have had members of our group attend various events:

- **5th Annual Statewide Gathering on the Status of Girls in Massachusetts in Sturbridge on May 12, 2017 was attended by Shanique Spaulding, Patricia Hallberg, Arlene Rodriguez and Ellen Moorhouse. This gathering focused on the first five years of working to improve the status of girls and specifically targeted engaging women's commissions, engaging men, engaging the next generation of leaders and how to do this in today's environment. There was also discussion on the Study conducted by the Girl Scouts and Simmons College on how girl's groups assist with increasing confidence in girls.
- **Advocacy Day, State House, Boston on May 17, 2017 was attended by Nicole Murray and Jennifer Metsch. Advocacy Day targeted specific priority legislation impacting women and girls in Massachusetts. I was able to speak briefly about the group and our excitement over embarking on this new journey with everyone. I also spoke on the legislation the Commission asked for us to speak on, Senator Harriette Chandler's and Representative Sarah Peake's act protecting girls from female genital mutilation. Along with other present Commissioners, I was able to meet with the aides of local legislators regarding all the priority legislation.
- **Open Meeting Law Workshop, Holyoke on May 30, 2017 was attended by Nicole Murray, Jennifer Metsch, Patricia Hallberg. This in depth workshop went over such topics as the purpose of the Open Meeting Law, to what qualifies as deliberation, meeting notices, when Executive Sessions are can be utilized, minutes, meeting records and the complaint process. As a newly formed commission, this was very useful information for our commission to get off to a good start.

Conclusions:

As we have only had two meetings together, we have known each other for less than two months. Over these two meetings we have found that there is a great deal we want to get started on. First and foremost we need to get the basics down regarding the setup of our organization. Our July meeting is going to primarily focus on establishing our bylaws and committees/task forces. We have been provided with the hearing notes from the hearing held in Hampden County prior to the creation of our commission. This information will provide us with a jumping off point as to where we want to focus moving forward. We also will be setting up time with other more established commissions (at least the officers of other commissions) for valuable insight.

We come from various towns and cities within Hampden County and have different types of professional experiences. These differences will be very beneficial to us in our mission of reaching as many women and girls as possible.

Goals for 2017-2018:

- **Set up our bylaws and meet with other more seasoned commissions regarding what they felt helped them get up and running, and learn more about their successes and what improvements they wish to make.
- **Reach out to other Women and Girls organizations.
- **Begin holding public hearings.
- **Get information about our new Commission out to Hampden County.

Submitted by:

Nicole Murray, Chair of the Hampden County Commission on the Status of Women

MetroWest Commission on the Status of Women Annual Report May 2017

MetroWest Commissioners

Cathy Ashton ~ Wayland
Jean Bertschmann ~ Hopkinton
Patricia Hohl ~ Framingham
Jen Maseda ~ Natick
Nancy Rosenblum ~ Ashland
Ceylan Rowe ~ Northborough
Denise Schultz ~ Franklin
Margareth Shepherd ~ Framingham
Heather Wightman ~ Hopkinton

Our goal as a Commission, beyond our mission statement as defined in our by-laws, is to strengthen our ability to advocate on behalf of MetroWest women. We seek to do this by listening, learning and informing ourselves about the issues that matter to the majority of women in our region, determining effective outreach strategies and developing a robust list of stakeholders. These efforts are intended to improve our ability to play a role in the support and advancement of women and the promotion of their rights and opportunities.

2016-2017 Findings & Accomplishments

Membership:

1 Commissioners reappointed to a 3-year term: Denise Schultz

New Members: Ceylan Rowe Jean Bertschmann Margareth Shepherd

Outgoing Members; Leonor Filipe Kelly Love Suzanne Reynolds-Alpert

Officers Elected:

Patricia Hohl, Chair Nancy Rosenberg, Vice Chair Jean Bertschmann, Secretary Heather Wightman, Treasurer Denise Schultz, Director of Legislation Cevlan Rowe, Director of Communications

Summary:

One year ago, as described in the MWCSW 2016 Annual Report, the Commissioners set a goal to increase awareness and advocate for issues identified as our priority areas of focus. These areas included:

- Economic Enhancement and Equality
 - o Equal Pay
 - o Paid Family & Medical Leave
 - Women in Transition
 - Women Running for Office
- Gender-Based Violence
 - o Healthy Relationships Dating Violence
 - o Healthy Relationships Sexual Bullying
 - o Pipeline to Prison
 - o DV/SA Against Women & Girls in MW
 - o SANE

The following will detail activities the MWCSW engaged in to reach those goals:

Meetings:

These priority areas were the focus and topics of the Commission's monthly public meetings. Specifically, MCI Framingham – and women who are transitioning out of this facility – continued to be a priority of the Commission as it sits within our jurisdiction. The Commission heard from two important speakers at our meetings on the issues affecting women currently incarcerated or in the process of transitioning back into the community:

On November 16, 2016, Middlesex County Sheriff Peter Koutoujian attended the MWCSW meeting at Mass Bay Community College. Sheriff Koutoujian provided an overview of his goals and objectives for establishing effective and efficient public safety policies and programs. Sheriff Koutoujian also recounted his efforts to address criminal justice reforms and promote health relationships. Commissioner Ceylan Rowe initiated a conversation with the Sheriff regarding the benefits of promoting the development of women's entrepreneurship to previously incarcerated women and women in transition.

On September 14, 2016, the new Superintendent of MCI Framingham, Allison Hallett, met with the Commissioners at SMOC in Framingham. After a discussion of the Commissioner's interest in the Women's Transition Program, Superintendent Hallett provided an overview of MCI Framingham programs and processes. Three areas of particular concern that Superintendent Hallett mentioned were:

- · the need for physical improvements at MCI Framingham,
- · the rising cost of medical and mental health services,
- · the high cost of staff.

Legislative Breakfast - Framingham State University - April 5, 2017

Over 70 people attended the Commission's first, of what is planned to be, annual legislative breakfast on April 5, 2017 at Framingham State University. Eight MetroWest Legislators attended and discussed their priority bill for the new legislative session, many of which are priority or supported legislation of the Commission.

Commissioner Patricia Hohl gave a brief report on the 2017 priority bill Housing Court Expansion S.946/H.978. Commissioner Margareth Shepherd gave a report on the 2017 priority bill Protect the Civil Rights and Safety of All Massachusetts Residents (Safe Communities) S.1305/H.3269.

Survey

In February 2017, the Commission designed and launched an online survey to access the issues that most concern women in the MetroWest. Healthcare costs, the high cost of higher education/student

debt, and low retirement savings were identified as the top 3 economic barriers to economic stability.

<u>Legislative Advocacy & Awareness</u> Legislative Priorities 2016 included:

An Act Providing for an Investigation By a Social Interagency Task Force Relative to Gender Responsive Programming for Juvenile Justice System Involved Girls (S.76, H.82 Sen. Linda Dorcena Forry and Rep. Gloria Fox)

An Act to Remedy the Results of Human Trafficking (Draft Legislation)

An Act to Establish Equal Pay (S.983, H.1733 Sen. Patricia Jehlen, Senator Karen Spilka, Rep. Jay Livingstone, and Rep. Ellen Story)

An Act Establishing a Family Medical Leave and Temporary Disability Leave Insurance **Program** (H.1718 Rep. Kenneth Gordon)

An Act Establishing the Massachusetts Pregnant Workers Fairness Act (H.1769 Rep. Ellen Story and Sen. Joan Lovely)

An Act Relative to Healthy Youth (H.448 Rep. James O'Day and Rep. Paul Brodeur)

An Act Providing for Equitable Coverage in Disability Policies (H.783 Rep. Ruth Balser and Sen. Jason Lewis)

An Act Relative to the Civil Commitment of Women for Alcoholism and Substance Abuse to MCI Framingham (H.1797 Rep. Kay Kahn)

An Act Creating the Hampden County Commission on the Status of Women (S.1080 Sen. Anne Gobi)

An Act Establishing Hampshire-Franklin Commission on the Status of Women (H.1867 Rep. Ellen Story)

An Act Establishing an Eastern Regional Commission on the Status of Women (H.3463 Rep. Gloria Fox)

Resolution to Encourage Equitable and Diverse Gender Representation on the Boards of Companies in the Commonwealth (S.1007 Sen. Karen Spilka)

There were great successes and disappointing "not-yets" in legislation as the 189th Session Massachusetts General Court closed at the end of 2016. These included:

Equal Pay

The MWCSW celebrated, with so many others, the passage of the Equal Pay bill in August, one of the most comprehensive equal pay bills in the country. Commissioner Denise Schultz remains active on the Equal Pay Coalition as they continue their work on this important issue.

Healthy Youth

Commissioner Denise Schultz represents the MWCSW on the Healthy Youth Coalition. Denise testified on behalf of the refilled Healthy Youth Bill S.234/H.2053 at a hearing of the Joint Committee on Education on April 13, 2017.

Paid Family & Medical Leave

Commissioner Denise Schultz has been actively participating on the Raise Up MA coalition advocating for refilled S.1048/H.2172.

Housing Court Expansion

Commissioner Nancy Rosenblum testified before the Judiciary Committee on May 2, 2017 in support of S.946/H.978 Housing Court Expansion. Written testimony was submitted to the Committee as well.

Sexual Violence on Higher Ed Campuses

The Commission filed written testimony to the Committee on Higher Education before a hearing on April 13, 2017 in support of S.706/H.632 Sexual Violence on Higher Education Campuses.

Communications

We have 273 people following us on Facebook but depending on the popularity of the posts, we have reached up to 2,000 people. Our posts range from events happening throughout the Commonwealth, to studies related to women, to programs young women are involved in. We have approximately 200 people subscribed to our newsletter, which we send out several times a year. We look forward to continuing to grow our social media presence and increasing the dialogue.

Public Outreach and Awareness

Commissioners gathered on May 24, 2016 at the Massachusetts Commission on the Status of Women Advocacy Day at the Boston State House to advocate for several bills identified by the MCSW that directly pertain to equal pay, medical and healthcare, equal rights, the establishment of two additional regional commissions and other bills that are important to the community.

Commissioner Nancy Rosenblum and Ceylan Rowe attended the Investing in Girls conference on Friday, May 12th, titled "Passion and Persistence." One focus was on having all CSW join in the effort to promote girls well being, specifically in that only 7% of State budget is slated for girls services. Thee was a discussion about our ability to include "and Girls" in the name of our Commissions. Another focus was on how Commissions could partner with funders to meet the needs of Commissions in identifying and working with girls' issues. Ceylan, Nancy and all other Commissioners at the conference met with funders, lead by Fred Daniels, from the Fred Daniels Foundation, and other Worcester funding sources. Fred Daniels is planning a longer brainstorming session for Commissioners in September.

Nancy Rosenblum advocated for some of the Commission's priority legislation on Sexual Health Lobby day, Jan. 31st, 2017.

Ceylan and Nancy Rosenblum attended 2 of RIA House's Community Engagement programs Jan. 11th and March 8th learning what the community is doing to address issues and needs of women who have been involved in commercial sex trade. Commissioner Heather Wightman is Executive Director at RIA House.

Margareth Shepard and Nancy Rosenblum attended several Immigration Forums: Framingham Coming Together Creating a Safe Community on March 23, 2017, a forum organized by Rep. Jack Lewis on March 28th, and the MetroWest Immigration Forum, a Call to Action on April 29th.

As part of the Commission's action around women running for office, the MetroWest Daily News Sunday published an op-ed by Chair Patricia Hohl on October 9, 2016.

The Commission held Women Organizing to Win on February 22- where nearly 50 women received training from Emerge and heard from a panel of women who have run for local office. The four

panelists discussed their accomplishments and experiences and included Commissioner and Franklin School Committee member Denise Schultz, Yolanda Greave, Deborah Butler, and Ilma Paixao. The event was covered in a front-page article in the MetroWest Daily News the next day.

2017 Focus & Strategy

Priority Legislation

- Housing Court Expansion S.946 (Sen. Spilka) / H.978 (Rep. Walsh)
- Protect Access to Confidential Healthcare (PATCH) S.591 (Sen. Spilka) / H.2960 (Rep. Hogan)
- Girl's Bill S.49 (Sen. Forry)/ H.119 (Rep. Tyler)
- Campus Climate Surveys H.2998 (Rep. Ehrlich)
- Sexual Violence on Higher Education Campuses S.706 (Sen. Moore) / H.632 (Reps. Farley-Bouvier and Donahue)
- Compliance with Anti-Shackling Law for Pregnant Incarcerated Women S.1359 (Sen. Spilka) / H.2494 (Rep. Khan)
- Protect the Civil Rights and Safety of All Massachusetts Residents (Safe Communities)
 S.1305 (Sen. Eldridge, Sen. Lewis, Rep. Lewis) / H.3269 (Rep. Matias)
- Transmitting Indecent Visual Depictions by Teens H.948 (Rep. Roy)
- Supporting Working Parents Who Run for Public Office (Child care tax credit for candidates)
 S. 386 (Sen. Jehlen) / H.2898 (Reps. Connolly and Meschino)

Supported Legislation

- Healthy Youth S.234 (Sen. DiDomenico)/ H.2053 (Rep. O'Day)
- Paid Family Medical Leave S.1048 (Sen. Spilka) / H.2172 (Rep. Gordon)
- Pregnant Workers Fairness Act S.1023 (Sen. Lovely)/ H.1038 (Rep. Rogers)
- ACCESS S.499 (Sen. Chandler) / H.536 (Reps. Haddad and Scibak)
- Preventing the Sexual Abuse of Children and Youth S.295 (Sen. Lovely)
- An Act to promote homelessness protection in MA S.831 Sen. DiDomenico / H.968 (Rep. Tyler)
- An Act to strengthen laws combating human trafficking and protecting survivors of modernday slavery S.905 (Sen. Montigny)
- Enhancing the Lives of Survivors of Human Trafficking S.906 (Sen. Montigny) / H.766 (Rep. Day)
- An Act to prevent human trafficking and sexual exploitation in bodyworks establishments S.907 (Sen. Montigny)
- An Act to Keep Siblings Together S.75 (Sen. Spilka)
- Protecting Girls from Genital Mutilation S.788 (Sen. Chandler) / H.2333 (Rep. Peake)

In addition to its legislative advocacy, the Commission is focused on the following areas for the upcoming year:

- · Violence and Abuse on Campus
- · Housing Court Expansion
- · Education
- · Women Running for Office
- MCI Framingham
- Safe Communities Act
- Safety & Wellbeing
- Healthcare

Goals for 2017

Increase awareness and advocate for issues identified as our priority areas of focus. Increase awareness of the MWCSW through social media postings and events.

Submitted by: Patricia Hohl, Chair, MetroWest Commission on the Status of Women



Annual Report May 2017

Worcester County Commission on the Status of Women ~ Members

Chantel Bethea ~ Worcester
Cathleen Liberty ~ Worcester
Suzanne Lewandowski ~ North Brookfield
Irene Rodriguez- Hernandez ~ Gardner
Amy Ebbeson ~ Rutland
Judith Ockene ~ Harvard
Randi Zanca ~ Northbridge
Sheila Simon-Aleman ~ Fitchburg
Joann Stemmermann ~ Bolton

The following were nominated and elected as officers:

Chantel Bethea ~ Chair

Amy Ebbeson ~ Vice Chair

Cathleen Liberty ~ Secretary (note taker)

Advisory Board Members

Robin Currie ~ Worcester Courtney Ross Esobar ~ Worcester Talia Gallagher ~ Worcester Jacqueline McLean ~ Shrewsbury Fiona LaRosa-Waters ~ Cambridge

Purpose:

The purpose of the Commission shall be to advance women toward full equity in all areas of life and to promote rights and opportunities for all women. The mission of the Worcester County Commission on that Status of Women is to act as a permanent centralizing force and effective voice in the County of Worcester to ensure the equal status of women of every race, religion, ethnicity, socioeconomic status, national origin, ability, age and sexual orientation in educational, economic, political, health, legal, and social spheres including the provision of information, referrals, and guidance. The commission stands for fundamental freedoms, basic human rights, and the full enjoyment of life for all women throughout their lives.

Commissioners:

Chantel Bethea (Chair), Amy Ebbeson (Vice Chair), Suzanne Lewandowski, Irene Hernandez, Joann Stemmermann, Judith Ockene, Randi Zanca, Sheila Simon-Aleman, Cathleen Liberty (Note Taker)



Membership:

We had one member step down due to work and commitment level of the commission. We have now filled that position with Joann Stemmermann of Bolton, MA. She comes with a background in Adolescent Development, Gender Identity and Agency, Curriculum Design, Strategic Gendering, Critical Pedagogy, Qualitative Research and Feminist Analysis.

Hearings/Public Forums:

The Worcester County CSW and the Mass Commission on the Status of Women held a public hearing on "Women's Issues" in Leominster, Ma on January 24th at the Leominster Public Library. The theme: "Citizens, government officials and organizations that advocate for women and families in the region are invited to attend and encouraged to participate. Let us know about issues that are important to you, your children, your family and your community."

The event was attended by about 50 people. Issues raised were access to transportation in rural areas, services for homeless women and families, the need for comprehensive sexuality education to decrease the amount of teen pregnancy in high schools. The need for more supports for women living in poverty was highlighted. A few citizens testified about the over-prescription of damaging psychoactive medications with little medical oversight and follow through.

Additional Activities:

Worcester County CSW participated in the CHIP (community health improvement plan)

Vision:

Greater Worcester is a great place to be born, grow up, learn, live, work, raise a family, grow and participate in community life.

Mission:

To promote the shared learning, reflection and broad engagement that improves community decision-making and quality of life for residents of Healthy Greater Worcester.

Commissioners:

Chantel Bethea (Chair), Amy Ebbeson (Vice Chair), Suzanne Lewandowski, Irene Hernandez, Joann Stemmermann, Judith Ockene, Randi Zanca, Sheila Simon-Aleman, Cathleen Liberty (Note Taker)



To further its mission, Healthy Greater Worcester, CHNA 8 will work together to: Build and maintain the CHNA participation, ensuring that it is universally inclusive and representative of the diverse organizations, agencies, and CHNA 8 residents; Create opportunities for networking between people and organizations within the CHNA; Educate, raise awareness, and find solutions to health issues that affect quality of life; Provide guidance to CHNA towns in their efforts to assess gaps and assets;

Develop, implement, and evaluate initiatives, events, projects and policies that address areas of common interest to the CHNA 8 members; and Mobilize the community to advocate for health in all policies and ensure implementation through effective program models and best practices.

The commission continues to use the CHIP as a touchstone and a basis for interagency collaboration.

Worcester County Commission on the Status of Women held their First

Legislative Breakfast September 16th 2016



The meeting included breakfast, networking, and a panel discussion among local elected officials and experts on policy issues impacting women's issues.

Worcester County CSW partnered with Emerge MA for a "WOW Women Organizing to Win Event December 5th at the YWCA.

The panel made it clear that women have the power to make a difference in their communities.

Learn from the women who have, build the skills to tell your story, and grow your network to get involved!

Commissioners:

Chantel Bethea (Chair), Amy Ebbeson (Vice Chair), Suzanne Lewandowski, Irene Hernandez, Joann Stemmermann, Judith Ockene, Randi Zanca, Sheila Simon-Aleman, Cathleen Liberty (Note Taker)



The workshop included a panel of powerful women leaders, training on skills you need to be civically active, and a discussion about opportunities that exist to change the world. It was attended by about 25 women from across the state, with participants coming from as far away as the Berkshires.

Worcester County CSW partnered with Worcester State University on a presentation on Human Trafficking on Feb 22nd 2017

Robin Currie founded the Central Massachusetts Coalition to End Human Trafficking and also works with "Not for Sale," an agency addressing the problem nationally. She recently embarked on a 500-mile "Walk Free" trek of the streets and backyards of New England to raise awareness that human trafficking is a local problem. She spoke to a standing room only crowd of community members, representatives of nonprofits and WSU students, staff and faculty.

Worcester County CSW partnered with the Racial Justice Task Force of the YWCA for International Women's Day on March 7th 2017 with keynote Speaker Maura Healey Attorney General of Massachusetts.

Keynote Address

Maura Healey, Massachusetts Attorney General

International Women's Day is a worldwide event celebrating the achievements of women while calling for greater equality.

We had an inspiring evening as we honored women's experiences, addressed challenging issues, and celebrated who we are. This year, Be Bold for Change! Advocate and take actions that truly drive change for women.

Worcester County CSW will be participating in the Fifth Annual Statewide Gathering with Investing in Girls May 12th 2017 in Sturbridge, MA.

The Investing in Girls Alliance (IIGA) was created in 2007 at the behest of the Worcester Mayor's Task Force on Youth at Risk due to concerns about the rise of violence among girls and young women in greater Worcester. The Alliance is made up of representatives from local and state government agencies, public schools and colleges in the Greater Worcester area, non-profit and private organizations.

Commissioners:

Chantel Bethea (Chair), Amy Ebbeson (Vice Chair), Suzanne Lewandowski, Irene Hernandez, Joann Stemmermann, Judith Ockene, Randi Zanca, Sheila Simon-Aleman, Cathleen Liberty (Note Taker)



The Investing in Girls Alliance (IIGA) is an unprecedented collaboration to address the challenges girls face in the crucial middle-school transition years. IIGA's mission is to improve services for middle school girls in central Massachusetts through research, education, advocacy, and collaboration. The ultimate vision of the Investing in Girls Alliance is that all girls grow up to be happy, healthy, and productive women. In order to achieve our mission we focus on three priority areas. Physical, Mental and Sexual Health are core to girls' well-being and good health provides the foundation for achievements throughout her lifetime. Education and Economic Empowerment gives girls the tools and opportunities they need to be in charge of their lives and actively engage in their families and communities. Addressing issues of Violence and Safety is fundamental to girls' success; we must ensure the safety of girls where they grow, learn, work and play. The work of IIGA centers around four key strategies; Data and Research to effectively measure the well being of local girls and understand their current and emerging needs, Public Education to raise community awareness of the unique needs, assets and challenges of middle school aged girls, Promoting Best Practices through networked training and peer sharing and Advocacy to secure gender equitable polices and sufficient resources for girls by aligning with like partners across the state including the MA Commission on the Status of Women and Girls.

Conclusion:

This year's findings demonstrated that the women of Worcester County have a lot of work to do to achieve the potential and full equality of all women. The most pressing issue is the war on drugs for women. The lack of services, and beds for those trying to become better in their communities.

Priority Issues identified:

- · Mental health
- Health care navigation, available services, transportation to services, appeal process when service is denied
- Substance abuse
- Eating disorders
- Culturally Competent/ Appropriate Services
- Domestic violence
- Sexual abuse/Rape

Commissioners:

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- · Economics for women- Jobs, Financial literacy
- · Childcare, Child hunger WIC
- · Immigrant women
- Education (pre-k through college)
 - o Stem pipeline
 - o Head-start
 - o Teen pregnancy
- Seniors
- Veterans

Goals for 2017 - 2018

- Collaborate with the Mass CSW and Regional Commissions to hold more public hearings in order to raise awareness of critical issues facing women in Massachusetts and to grow the participation and involvement of individual and organizational allies in the work of advancing equity for women of Massachusetts.
- Maintain regular contact with our legislators and officials on issues that concern women that have been identified as our priority areas of focus.
- 3. Continue to collaborate with other organizations, and public officials, in order to support women and girls through public awareness.
- Work closely with our sister commissions on implementing and developing best practices for the betterment of each commission.
- 5. Work on writing and proposing new state level legislative policies for women.
- Attend community events and share literature about the commission to promote awareness of our role and work to increase involvement in our activities.

Submitted by: Chantel Bethea, Chair of the Worcester County CSW

Commissioners:

Chantel Bethea (Chair), Amy Ebbeson (Vice Chair), Suzanne Lewandowski, Irene Hernandez, Joann Stemmermann, Judith Ockene, Randi Zanca, Sheila Simon-Aleman, Cathleen Liberty (Note Taker)

APPENDIX

Massachusetts Commission on the Status of Women North Adams Public Hearing

North Adams City Hall October 18, 2016

ORAL TESTIMONY

Donna Morelli, Staff Attorney at Community Legal Aid

Discussed the work of Community Legal Aid, which provides free civil legal services to indigent residents of the area. There is a lack of affordable childcare; costs add up to more than in state 4-year tuition. Issue disproportionately impacts already vulnerable populations. Even with child support, single mothers are not able to afford the high prices. This is an economic hardship affecting many.

Tara Jacobs, North Adams School Committee member

Former BCCSW Commissioner; offered remarks on opioid crisis. Resources are available but more needs to be done to offer support, specifically to women and teens. Legislation has been passed, but not enough is being done to direct resources. Assessments are being done through the schools, but if a teen self-identifies, schools need to funnel resources from the community. No facilities specifically for youth; teens are being placed in detox with adults.

Gillette Conner, BCCSW Chair

Followed up on Tara's remarks. Opioid abuse is an issue that comes up frequently during BCCSW meetings. It is not immediately apparent that opioid addiction is a woman's issue, but for women who are recovering there are additional hurdles. They are often primary caregivers and breadwinners, and this can deter women from seeking treatment. BCCSW is working to ensure that women's needs are being carved out as part of larger picture.

Representative Gailanne Cariddi

Would like the MCSW to consider unique needs of rural Massachusetts vs. urban Massachusetts. Wants to ensure that rural Massachusetts has adequate resources for women and especially women of child rearing age. As a result of local hospital closing, there is no maternity ward with 20-25 miles. Opioid addiction and child care are very important, and these issues need to be considered through lens of rural women as well. Need to advocate for parity in services, and specifically with healthcare professionals to ensure that there is adequate attention to all. Even if services are available in Boston and targeting rural communities, transportation is a major obstacle.

Jean Vankin, North County Cares Coalition

North County Cares Coalition came into being after local hospital was closed, NCCC is advocating to re-establish the facility. Transportation is major issue. No maternity ward or birthing centers with 23-25 miles. Birthing centers are required to be within 4 miles of a hospital, but there is no hospital. Also great need for detox and stabilization center. Follow up services need to be available after detox treatment, detoxing is dangerous and you medical supervision is necessary. Do not have comparable services in northern Berkshire as there are in south and central Berkshire. Hospital in Vermont is equidistant; as a result, the area is losing births to Vermont. This is complicated by the fact that services out of state are out of network and are not covered.

Mayor Richard Alcombright

Current national election climate is easy to laugh about but reminds us of serious issues facing women. Many of the issues being discussed are gender biased and charged. It's important to offer support at local levels.

State cuts to social service organizations means that workers take the brunt of this. Low pay creates challenges in staff retention and affects services that community members receive. Throwing money at problems does not solve every issue, but restoring funding to social services is an instance where funding could create a big impact.

Rachel Branch

Born in North Adams, returned to care for her mother in 2000 until 2004. Member of numerous service organizations, all as a volunteer. Feels that public service is in her blood. Faced sexual harassment and discrimination throughout career, paid 3x, 4x or 5x less than male co-workers. Bears the brunt of overbearing medical costs after having been in an accident. Solely responsible for home equity loan, rising property taxes, and only source of income is social security income. Combination of all of these issues have led to impoverishment. Feels that she serves as a thumbnail of many women in her age group facing poverty.

All of these issues are compounded by the lack of local hospital. This loss has had devastating effects on women, particularly the elderly, and members of the community who benefited from mental health unit. Called for the MCSW to use authority as an advisory committee, to advocate for the return of these services.

Raya Kirby, Brien Center

Mom, wife, and social worker, works at the Brien Center. Affordable childcare and family medical leave are at forefront of her mind. Recently returned to work after 12 weeks of unpaid medical leave. In order to scrape together this time, Raya did not take sick, personal or vacation days in over 10 months leading up to giving birth. This allowed her to accumulate some paid time (approx. 6 weeks paid). After 4 weeks back, just received first paycheck. Had to save scrupulously throughout pregnancy, in order to get by. Pointed out that puppies or kittens aren't sold until 8 weeks old, but mothers are asked to return to work nearly immediately. It creates a real struggle to leave small child in day care. Situation is further complicated by the fact that childcare costs are astronomical. Vouchers are available but with a waitlist. Even as a Masters level clinician, compensation can sometimes be only \$15/hr. Despite having two full time educated workers in family, they qualify for SNAP and fuel assistance.

Deborah Brown, Northern Berkshire Community Coalition

Discussed healthcare challenges in Northern Berkshire. Lack of resources and transportation are major obstacles. Medical Uber would be a good supplement to address transportation issues. Working with group in Bennington VT to establish a regional effort. The group is particularly mobilizing around opioid abuse.

Michelle Rubin

Owns her own childcare business in Greenfield. Licensed family childcare provider, supporting 10 children. Sees so many families struggling to access affordable childcare. More than 25,000 families on waitlist for childcare voucher right now. Parents are not able to work without childcare they can trust, and issue is further complicated by lack of transportation access. Vacant spots are available but parents can't get there without reliable transportation. Presently, childcare costs more than tuition at UMass Amherst. Lack of access prevents parents from working and families suffer. Mothers should not have to choose between working and caring for new child. Had personal experience with ill newborn, while in the midst of divorce, and two weeks total time off. Had no choice but to return to work, which included heavy lifting, only two weeks after giving birth.

55 million Americans have no retirement savings, legislation has been passed in California to create state sponsored retirement funds for private employees. Employees have the option to contribute voluntarily. Followed up on earlier question about child-care vouchers- rates are different based on region. Voucher slots pay set amount from the state that is less than the rate private parents pay to provider.

Buffy Lord

Transportation is a major issue in the area. B bus is the only option. Many community members end up paying for cabs to go to grocery store and this adds up. The majority of legal/court issues require a trip to Pittsfield, and there no viable public transportation option. A cab ride from North Adams to Pittsfield costs \$25.00, and this places an unfair burden on low-income populations. Lack of transportation also affects education. The B bus does not run after 5:00pm, which means that full time workers are not able to take bus to community college. Summarized that this is an issue that impacts access to education, childcare, healthcare and justice.

Lisa Blackmer, North Adams City Councilor

Graduate of MCLA, committed to families, women and children. Co-Chair of gala for Berkshire County Kids' Place, which serves 400 children per year who are victims of abuse. Told story of girl who was 15, survived abuse due to support she received from the organization, and who would not have been able to go on to college without this network. Summarized that women's issues are family issues.

Considered opioid issues through a gendered lens; pointed out that a number of women are introduced to heroin through partners. As part of preventative care, it is necessary to empower women, so that they do not end up in unhealthy relationships. Many issues begin before there is a family. Recent report cites that suicide rate among teenage girls is dramatic. Support needs to begin as early as quality childcare to reduce issues down the lane. Lastly, there are limited resources available for family planning in Northern Berkshire. Tapestry is in the area but only with limited services. Women need access to reliable birth control and reproductive services to maintain control of their lives.

Susan Rose

Single mother, divorced at 19, many resources were not available at the time. A program was introduced through Gov. Dukakis to provide education to single mothers that made a major impact. Susan struggled with learning disabilities, went on to get GED, and become a respiratory therapist after one year of experience in hospital. After establishing herself, was diagnosed with Bipolar one disorder and had to start life over. Was sexually abused, and has family members who struggle with opioid abuse. Wrote a book about her life, and now strives to educate those around her about the struggles of mental illness. Very disappointed to hear how little staff members at mental health facilities are making; their work is vital and they should be compensated fairly.

WRITTEN TESTIMONY

October 18, 2016

Thank You Commissioners for holding this forum today.

I am Rachel Branch, born in North Adams and returned here in 2000 to care for my mother until she died in 2004. She was the second woman I cared for for a total of 12 years as a caregiver, the first 8 years while holding a full-time job.

I am a member of One Billion Rising and, as a result, created and produce my Community TV show, Solutions Rising. One Billion Rising was begun by Eve Ensler and a group of women to stop the violence against women and girls.

I am a member of Sandy Hook Promise to stop gun violence.

I am a member of the North County Cares Coalition, fighting for restoration of our North Adams Hospital.

I have been a Certified Massachusetts Intensive Care Foster Parent for respite care, now in my seventh year.

I have been a Mayoral Appointee three times: in Denver, Bridgeport, CT, and North Adams, serving here for 5 years as a Fair Housing Commissioner.

I was elected last November as a write-in candidate to a local school committee.

All of this work has been done as a volunteer with a great deal of care and love. Public Service is in my DNA!

I have been a working class employee my whole adult life. As a woman, I can hardly remember a time in any position that I was not sexually harassed or trying to navigate a hostile work environment. These stories can be told at another time.

As a woman, throughout my working life I was paid 3, 4, 5 or more times less than men. This resulted in no way to save, no way to prepare for retirement among many other detriments for working women.

My mother and I got a home equity loan together in December, 2003, so that I could continue to care for her. She died three months later so I took my Social Security at age 62 and became fully responsible for the home equity loan.

Why am I telling you all this? Because at 74 1/2, as a result of all these circumstances, I have been impoverished...needing fuel assistance...needing food assistance...and needing my Medicare Part B paid.

Social Security is now my only income. I am disabled as the result of a guy hitting me nine days after 9/11 with only minimum insurance coverage. I will be in ongoing medical care the rest of my life for which I pay nearly \$100 each month above and beyond the Medicare coverage I have. I cannot afford a supplemental policy.

My home equity loan cannot be increased because I do not have enough income even though I have had A1 credit my entire life.

Social Security has not increased 3 times in the past 6 or 7 years so there is a loss there and a compounding factor to that loss.

My taxes keep rising. At 70 I qualified for a \$500 abatement because I am low-income. This does not begin to keep up with the increased taxes and the addition of a sewer fee/tax on my water bill. I have been trying to sell my home for 5 years now. The value keeps going down and the taxes keep going up. In the fall I move to the front of my home to save heat, and my thermostat is set at 60 degrees and the furnace is shut off every chance I can.

So, this is a thumb nail picture of many of the women in my age group who have worked their entire lives. In North Adams, low-income women in my age range now face not having a full service hospital. My family and other community members started that hospital. I was born there, and both my mother and father died there. My mother spent the last 4 days of her life in the new critical care unit of the hospital with incredible, caring nurses. If she had had to go to Pittsfield during the blinding snow storm that occurred 2 days after she entered the hospital, I do not know what I would have done.

I am caught in a Catch 22 and will not under any circumstances go by ambulance to Pittsfield if I am critically ill. I would rather die! The loss of our hospital and the effects on our elderly women must be taken very seriously. The loss of the mental health wing is egregious for those suffering from addiction, violence, or any other mental challenges. We need our hospital restored.

As commissioners, you are advisory, but, individually, you have access to fight for the needs of the most vulnerable. As an advisory group, you must realize that if you rock the boat, you will probably be thanked and moved out of the way, but you still can stand up in any arena you choose. Women are underrepresented in all of our legislative bodies, unconscionable at this time in our history, and that disparity in inequality must be addressed and remedied. You can be a part of that solution.

As commissioners and women, you can help find ways to assist mothers who are struggling to keep their children from the foster care system because of domestic violence. As commissioners and women, you can use your positions and voices to help women who have been beaten and raped find safety and economic assistance. As women and commissioners, you can take the information you are receiving at these forums and demand responsiveness from our legislators and try to stop those men who hold up a patriarchal system to keep women in their place. As commissioners and women, you can align with men who support women and build coalitions to address these ills.

Believe me, I am truly blessed...I still have a roof over my head, food on the table, music in my life, people I care about who care about me, and breakfast or lunch out once in awhile.

All I have to do is think about the foster children who have come into my life, the trauma they have suffered from violence and/or sexual assault. All I have to do is think about all the women who have been beaten, raped and are so downtrodden trying to recover, and, as one of them, I am blessed that I was still able to function and hope I have used my gifts to help.

Thank you for your time and consideration.

Rachel I. Branch

999 Massachusetts Avenue North Adams, MA 01247-2231 Telephone: 413-664-0134 Copyright March 18, 2016, by Rachel I. Branch

Massachusetts Commission on the Status of Women Public Hearing Testimony

My name is Donna Morelli and I am a Staff Attorney at Community Legal Aid, working in the Family Law Unit. Community Legal Aid (hereinafter known as "CLA") provides free civil legal services to indigent people in Western and Central Massachusetts. CLA specifically provides legal services in the areas of housing, benefits, immigration, elder law, and family law. People who earn and/or receive 125 percent of the Federal Poverty Level would be income eligible. We also provide legal services to people who earn and/or receive up to 200 percent of the Federal Poverty Level with exceptions. Such exceptions include, but are not limited to, unreimbursed medical expenses, day care costs, and transportation costs to work and/or school.

The issue that I would like to bring the Commission's attention is the lack of affordable child care. A recent study by the Economic Policy Institute noted that parents pay 59.4 percent more for child care per year than the cost of in-state tuition at a four year public college. Families with more than one child on average will spend nearly \$30,000 on child care for infants and four year olds.

While the lack of affordable child care affects all parents, it has a significant economic effect on clients I have represented. As stated previously, CLA provides legal services in the area of family law, particularly survivors of domestic violence. Approximately 95 percent of my clients have suffered one or more forms of domestic violence, whether that abuse is emotional, verbal, physical, sexual or financial. Ninety-eight percent of my clients are mothers, separated or single with an average of 1.2 children. In the last year, 42 percent of clients were seeking a divorce and 40 percent were trying to maintain custody of their children.

Forty-five percent of clients were working and receiving no government benefits (i.e. food stamps [SNAP], SSDI, SSI, Unemployment Assistance). Thirty percent of clients receive some form of government benefits. Ten percent of clients work and receive some form of government benefits. Sixteen percent of clients, however, were receiving no income when they applied for legal services.

www.bostonmagazine.com/news/blog/2016/04/12/infant-care-massachusetts-cost/

² Id.

The average income of clients is \$271 per week or \$1166 per month. The average amount of child support received is \$150 per week. Even with child support, these single mothers still cannot afford child care without losing a huge part of their weekly income. The cost of child care in Massachusetts is broken down by infant, four-year-olds, and school age children. It also is broken down by Child Care Centers and Family Child Care Homes. The cost of Child Care Centers in Massachusetts for one infant is \$17,082 per year. The weekly cost of such care would be \$328 per week, which is \$57 dollars higher than the clients' average weekly income. For mothers with two infants, the cost would be \$656 per week. The cost of Family Child Care Homes in Massachusetts for one infant is \$10,679 per year or \$205 per week. The costs would be \$410 for two infants.

The cost of child care decreases somewhat for four-year-olds when compared to infants. The cost of child Care Centers in Massachusetts for four-year-olds is \$12,796, per year or \$246 per week.⁵ The clients I represent would be left with \$25 dollars per week after paying for care for one child. The cost of Family Child Care Homes in Massachusetts for four-year-olds is \$10,012 per year or \$192 per week. As stated previously, this is the cost of child care for one child. The clients whom I represent still could not afford these costs without depriving themselves (and their children) of necessities such as food and housing.

The cost of child care decreases dramatically for school aged children. The cost of Child Care Centers in Massachusetts for school age children is \$3,418.9 per year or \$85 per week. The cost of Family Child Care Homes in Massachusetts is \$3,960 per year or \$99 per week. While these costs are significantly lower, it is important to remember that these costs are for one child. My clients, earning on average \$271 per week, still would struggle to pay day care for two children.

In conclusion, the lack of affordable child care is an economic hardship for the clients that I represent. While child support that clients receive is necessary and helpful, it is not enough to decrease this hardship.

³ www.childcareaware.org

4 Id.

Respectfully submitted,
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413.449.5003
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⁵ Id

⁶ Id.

Massachusetts Commission on the Status of Women Salem Public Hearing

Salem State University November 15, 2016

ORAL TESTIMONY

President Meservey

Salem state named women run business, applaud work to support women with disabilities, would be remiss to not acknowledge election results, it has been a wonderful step forward to have such an accomplished woman involved.

Mother is a veteran, served in WW2, we serve on the shoulders of some great women, welcome to Salem state university.

Sen. Joan Lovely

Welcomed the commission to the district, acknowledged and appreciated partnership on equal pay bill, gave update on bill that is still being actively worked on, Pregnant Worker's fairness act, working with AIM to balance out business side with pregnant workers side, very hopeful to have bill passed, even during informal session, have okay on Senate side, need support still advocate to house ways and means Echoed sentiment of president Meservey her mother was also a veteran, we serve on the shoulders of great women. Encouraged the public to stay in touch with legislators.

Representative Tucker

Bookend after election, President Clinton first stop after second term was at Salem state for speakers series, strong supporter of equal pay bill and trans protection bill, co-sponsor of healthy youth bill, stands behind bill despite some opposition and would still like to see it passed. Pregnant workers as well. Rep. Story is floor leader, has been a wonderful resource. Proud to support unsung heroine event, recognized his nominee, Julie Henchy Rose, of 2016.

Joanne McCrea

Recognized the efforts of Sen. Lovely and Rep. Tucker and praised their early support of the bill.

Commissioner introductions

Nina Goodwin Program director at YWCA north shore

Provide free services to protect victims of sexual assault, alarmed about recent events and their impact on the safety and prosperity of women. Need to teach basic human rights, increase in hotline calls 42% increase related to election concerning street harassment.

Sonja Styblo

Here to speak about zanax like drugs, benzos, disproportionately prescribed to women, women experience more trauma, more likely to be viewed as hysteric, viewed as mother's little helper, seem to cause menstrual complications, there are scarce studies on the drugs, can impact babies when mothers are taking, became personally disabled while taking these drugs and then suffered terrible withdrawal systems, after having taken a low dose of prescribed colonopin, 50% increase in Alzheimer's for those who take prolonged doses, the drugs are no longer effective after a few weeks, tolerance sets in and withdrawals begin. Addictions began after 8 weeks. Recommendations are not translating to practice. A movement is beginning but not enough is being done. Benzos put patients on the path of becoming polypharmeceuticals and lifelong patients. Awareness being raised by benzo info coalition, rep Paul McHerdy of Dedham sponsored bill.

Patricia Fae Ho - past board president of health quarters

Call to action; support federal funding of family planned services, budget line 45131000 for state funding of family services. Health quarters is an ECP, 60% of low income women of reproductive age require family planning support, number of obstacles including long waits, expense, privacy concerns about health insurance. On average for every dollar spent on family planning services (title 10 clinics) achieved a savings of \$7 on health care spending. Unintended pregnancy cost \$21 billion, need for publicly funded contraceptive services continues to grow as the numbers of low income women rise, these rights are threatened.

Ana Nuncio, community partnerships at house of 7 gables

Here on behalf of Latino leadership coalition, given anti women anti-immigrant rhetoric of president elect, concerned about how this will affect these populations. Want to share this anxiety with the group, as well as hope. Very worried for Latino community and concerned about police departments rounding up seemingly undocumented immigrants, receiving a number of calls, want to establish Salem as a sanctuary of a city for immigrants. Need to identify who is standing with these groups. Feels the impact of hurtful rhetoric against her country of origin, has a deep impact to label 2.5-3 mill people as criminals. Victims of domestic violence are very scared to speak up about abuse for fear of revealing status, productive conversations have taken place about ensuring protections for the most vulnerable.

Maureen Whitman

Grad student at Salem state in school of social work, testify on behalf of la leche league, provides free services to breastfeeding moms, one of the major challenges is a lack of continuity of care between birth and children's 1 year, challenge to balance breastfeeding in the workplace. Scant legislation to help, many women have to work hard to advocate for the ability to breast feed, would like to support and echo priority of PFML and pregnant workers. Rates of breast feeding are much lower among Latina and black women 1 in 5 women experience post-partum depression, need more training for allied health workers to screen and identify PPD, and make quality referrals. Screening is not mandated or universal so many slip through the cracks, diapers affordable housing affordable childcare are also major issues.

Paula Gomez Storley

Here on behalf of center for hope and healing, HAWC, training on cultural informed and relevant approach to all facets of service-policing, doctors etc. do not need to be an expert in culture but awareness, all have culture, not new to country, we all have it.

Lack of awareness can be very harmful, survivors of abuse have experience with trauma, not always presented in the same way and the individual can be harmed by lack of understanding. Agencies and service providers need to collaborate to ease burden.

Julie Bakoian advocate for HAWC

DV service provider serve many communities, advocacy in English Spanish and Portuguese, hospital based services. 4 issues that are perpetual for survivors, among them economic shelter not enough emergency shelter to fit needs. Programs aimed at stabilization are more effective long term sustainable solutions, not enough childcare, not enough access to free legal services, not enough understanding of domestic violence in judicial decisions.

Teury Marte

Area director for MRC, very familiar working with people with disabilities and dealing with rejection, seems the spectrum of people with disabilities, the rejection of immigrants that is being discussed is the same pervasive rejection that people with disabilities face on a regular basis. Need to engage communities, engage youth in civic process. High volume of minorities in north shore, Latinos and pacific islanders, looking to see people who look like, need to engage minority populations in becoming leaders in organizations, leadership roles ,, need funding to make these changes to jump start opportunities to get minority groups involved and grow. Cyclical issue that you can't get a job without experience, can't get experience without a job. 52% of Salem public high school is Latino, going to be serious skill gap in 10 years if we do not address this now.

Becky Hallowell

Single mothers are painted as moral issue, but it is an economic issue. Support women and girls in leadership and economic development. Shared statistics about single women renting vs owning, one in four families are single mothers, 61% of those in poverty are single mothers. Laser focus on these populations would have significant impact on low income populations. __% of households are single mothers are primary breadwinners. Single mothers are vast majority of homeless populations. Economic self-sufficiency is one of primary reasons women do not leave abusers. 4x proportion of single mother's income compared to partnered family to provide childcare, single mothers have 3x the rate of disabled children in their families. Poverty is trauma. Empath is measuring the brain science of poverty; trauma informed approach is vastly more effective method of supporting vulnerable populations.

Patricia Fae ho

Lack of income exasperates and causes the majority of all of these issues. Intersectional, multigenerational issues.

Elsabel Rincon

Wanted to appreciate Patricia's comment on intersectionality minimum wage \$28,000/yr, childcare is \$13k, 2bdrm apt \$14k/yr families are working two jobs 60-70/wk, families are already working hard and pulling up by bootstraps but can't get ahead, we need to work together and organize.

WRITTEN TESTIMONY

Dear Chairs and Members of the Committee on Mental Health and Substance Abuse,

My name is Hilary Gardiner and I live in Northampton, Massachusetts. I am here to share my story of benzodiazpine withdrawal, in the hope that you will support Bill H4062 sponsored by Representative Paul McMurtry.

Two years ago I was prescribed Klonopin for anxiety by a nurse practitioner. I only took Klonopin for one month, as prescribed, before deciding to get off of it because I didn't feel quite right. My prescriber came up with a month-long taper plan, which I followed to a tee. The mental and physical anguish that ensued is something I can't put into words to this day, and was significantly worse than the anxiety I originally intended to treat. When I called my prescriber to tell her about my symptoms, which were disabling, she told me they had nothing to do with the taper. My nervous system was constantly in fight-or-flight mode, I couldn't drive, my blood pressure and pulse were extremely elevated, I had the worst headache of my life for days at a time, I couldn't sleep for days at a time, and I experienced vivid hallucinations when attempting to sleep. The level of anxiety I experienced was deeply physiological and inescapable. It was as if everything around me, however benign, was something deeply, innately terrifying, and my body was constantly responding to this threat regardless of all attempts to rationalize the experience. I found support groups online and discovered there were thousands of people going through the same thing, people who had taken the drugs as prescribed, and tapered slowly as instructed, people who were in excruciating anguish like myself and whose prescribers would not acknowledge their experience.

I was diagnosed with an auto-immune kidney disease at four years old and have been through dialysis and two kidney transplants in the span of less than five years, at just 28 years old, but I can confidently say that the physical and mental anguish I suffered during withdrawal was unparalleled in its intensity. The weight of this admission, and the medical community's failure to acknowledge the scope of this problem, horrifies me to no end. To deny the experience of someone in withdrawal is quite literally paramount to giving someone a dose of LSD and then denying that it's the LSD causing one's "bad trip"; it is utterly cruel and dangerous. To downplay the dangers of these drugs, by insinuating that only people who abuse these drugs or who don't follow a taper plan are at risk for difficulties, is equally dangerous and is a lie for countless people.

I am supporting this bill because patients and doctors alike need to be made aware of the risks these drugs pose. The suffering incurred by the lack of information causes long-term iatrogenic injury and nervous system dysfunction in many people. The demands of this bill are very modest and their implications for preventing this suffering could be enormous. I strongly and respectfully urge you to support Bill H4062. Thank you for your time and consideration.

Written summary of testimony by Maureen Whitman, La Leche League North Shore Leader and North Shore Postpartum Help Group member.

As a representative of La Leche League of Massachusetts/Rhode Island/Vermont, a former Public Policy Intern at the Massachusetts Alliance on Teen Pregnancy and a member of the North Shore Postpartum Help group, I attended the public hearing at Salem State University on October and testified about some of the focus areas and concerns in regard to pregnant, postpartum and breastfeeding women. Below is a summary of my testimony.

La Leche League provides free phone, text and email help for breastfeeding women. Breastfeeding mothers in Massachusetts who are combining nursing and working outside of the home are challenged by a lack of meaningful paid family leave and have little continuity of care for breastfeeding support throughout the perinatal year. Breastfeeding rates among women of color, specifically African American women, are low and these disparities impact the health and wellbeing of families that face historical, social, economic and cultural barriers to breastfeeding. Peer support groups such as La Leche League, Nursing Mothers Council and new mother/parent groups at hospitals or community centers are the main way that women returning to work can find the information, resources and support they need to be able to follow public health recommendations in regard to breastfeeding exclusively for six months and then continuing for one year or beyond.

Up to 20% of women may be affected by perinatal mood disorders and there is a need for more widespread screening and better referrals to mental health services.

There is also a need for training for allied health workers to be informed about the signs of perinatal emotional complications so that they can also be a source of support and an avenue for resources.

Other things that are concerns for young families are the need for diapers, affordable housing and affordable childcare.

Legislation priorities that myself as well as the North Shore Postpartum group supports include:

- H. 1718 An Act Establishing a Family Medical Leave and Temporary Disability Leave Insurance Program
- S.2062 An Act Relative to Healthy Youth
- H.1769 An Act Establishing the Massachusetts Pregnant Workers Fairness Act

Massachusetts Commission on the Status of Women Leominster Public Hearing

Leominster Public Library January 24, 2017

ORAL TESTIMONY

Senator Jennifer Flannagan

151 elected female official of 196. Happy to be part of a delegation that is half women, though this is not the case across the state. Welcomed the commission and summarized issues in the area- single mother heads of household, transportation challenges, etc.

Rep. Natalie Higgins-

new to office, welcomed commission to Leominster, excited about opportunity to hear concerns of those in attendance.

Carolyn Read, Habitat for Humanity

Majority of homes built for single mothers. HD2669- exemption from some of criteria in safe act, Habitat for Humanity would like an exemption from this bill as they are not a for profit lender.

Carrie Noseworthy

Childcare for children with special needs, parents have to make difficult decision about whether or not it is cost effective to work. Parents have added challenges in advocating in school systems to receive education, securing caregivers equipped to care for children with special needs. Grave concerns about the fate of this population under the new administration. Extensions for people on the autism spectrum who had previously been not considered to be eligible for services, now these families suddenly are not hearing back about their status > Medicare becoming block grant would be serious threat to these families. Childcare is a family issue. Families are often kicked out of housing situation when landlords/neighbors are not familiar with autism. Schools lack funding to properly train teachers, can't turn away students but turn away when there are behavioral issues.

Sen. Flanagan weighed in on work that the state autism commission, autism community now has a "home" in the DDS, the work is new and developing.

Rick Marchand, Leominster City Councilor

Discussed experience with daughter's teen pregnancy, health educator in public schools, started in 1978- first task was to remove chapter on sex education, then asked to support 4 pregnant teens. Haven't come far since then. There is not enough support for these students. Challenged statement that teen pregnancy in Leominster not being a Hispanic problem, discovered that 43 teen pregnancies in the city. Young women are doomed moral game that the government is not taking care of. Tremendous stereotype, school departments need to work on the same page and not let students slip through the cracks. Gardner HS had a great program, house next door students and partners attended schools and released students to care for children during the day. Funding was cut during school year and students dropped out. Need comprehensive sex education, 1 in 4 sexually active young women has an STI, 3 of 4 don't realize they have it.

Heather Mazzaperro, Ginny's Helping Hand, School Committee

Excited to build on momentum of women's march. Areas lacking resources for women in Leominster 1.) Homeless women and their children, within past year Housing and community development has closed Fitchburg office, only option is to go to Worcester, often lacking transportation and impossible to get to Worcester. Previously able to just offer bus ticket to Fitchburg. Is an entire day process, and you are sent home if you don't have the correct paperwork. Ginny's helping hand uses donations from community to put up families in hotel room until they are able to get complete housing navigation process. Very scattered process. Currently small shelter in Leominster – has capacity for 5 families, not enough.

Without options, families sleep in emergency rooms, wander street. 2.) Opioid epidemic – care falls to mom, big stigma around subject that causes it to not be addressed, often double overdose with children in the other room. 3.) food insecurity- not a more hopeless feeling that not being able to provide food to your children. Need to address stigma around food insecurity as well. SNAP benefits are such a small contribution that people with social capital can advocate for service 300-500 families per month at Ginny's food pantry. Requirement to have children present at homeless shelter is logistically prohibitive and negatively impacts children's access to education. Students who receive SNAP benefits allow schools to receive extra funding and qualify for free/reduced lunch. Ginny's food pantry experiences significant uptick when school is not in session.

Maria Alicea , Spanish American Center

Telephone line is now available to provide information through phone, and DHCD have to provide transportation. With eviction it is very difficult to get housing, but eviction is required to get into housing. Gave example of woman who came from Honduras with 5 kids leaving DV situation, was told to get evicted and now won't be able to secure apartment with that on record. There are occasional loopholes for families who can prove that a situation staying with family. f a family is lucky enough to get on a list, wait is 7 years. Especially difficult for families with children with special needs, housing placement can uproot students with IEP.

Jessica

Often PCPs offering advice to food insecure families are not offering culturally sensitive.

Lauren Omardian, Waterntown

HB 4062 Benzo bill, Walked into clinic with emotional problems and walked out with Xanax, suffered a lot.

Robert Whittaker's anatomy of an epidemic as mentioned.

Christina Souza, Benzo coalition

H4062 informed consent of benzo, discussed how this issues affects women and mothers, on medication for a short time but had serious impact.

Ameral Gutierrez, YWCA Central Massachusetts

Women and families in Leominster affect interconnected issues- !.) transportation is serious issue, large gaps in provisions. Travel time eats up huge portion of service providers time. Intersectionality of issues, people go from Boston to Springfield and forget that central mass exists.

City Councilor Claire Freida

Longest serving elected official in Leominster. Does a lot of work with the MA Municipal Association. Also a real estate appraiser, a lot of work with divorce appraisals. Usually more difficult for women, hard to find a place for mother and children, uproots their lives and stability if have to move elsewhere. DHCD needs to provide more incentives for multi-room buildings/apartments, work with developers on 40B. Opioid epidemic: obligation to lead, female recovery is an issue. Need more resources specifically for women's recovery.

Sue Chalifoux, Leominster City Council

Longest serving city council member in Leominster, in families going through divorce very challenging to find 3 bedroom housing options. There needs to be more incentives for developers to create this genre of housing. Female recovery during opioid crisislack of resources available.

Irene Hernandez

Survivor of domestic violence, stigma surrounding victims, fear of having children removed during DV situation, rips families apart, and system perpetuates violence. Need to identify women in these situations and offer support and resources. Need to hold organizations accountable to the mission. 51A against mothers for not removing children sooner is counterproductive to keeping children safe.

WRITTEN TESTIMONY

Letting Go of My Story: A Mother's Fight to Heal Benzodiazepine Testimony Impact Statement

Introduction

By Christine Souza

I have traveled here today to speak about the dangers of benzodiazepines. The last 3 years have brought about life changes, chronic pain, and self doubt. Although the pain and physical sensations rise and set with me, it has taught me so much about myself and has given me the courage to make changes in my life that are leading me in the direction that I am meant to go. The true grit I have gained by going through this experience of taking benzodiazepines, as prescribed, as well as not being educated about the risks, allows me to clearly share my story, in hopes of preventing others to have to go through the unending, torture of withdrawal. I was listening to a meditation not too long ago when the guided voice suggested to let go of your story so that true healing can take place. For the past three years the constant brain fog, pressure and pain inside my head has deafened my true voice. I hope to gain that voice back and let go of my story by sharing it today. I plea that Massachusetts passes the Benzo Reform Bill that will help prevent this terrible class of drugs from harming others. (Bill H4062- Informed Consent of Benzodiazepines and Nonbenzodiazepine Hypnotics)

My Story

I would like to explain how Benzodiazepines and SSRI's greatly damaged my central nervous system, and devastated my life. I am a 37 year old mom, a Massachusetts resident, a middle school teacher, and I was a wife. I began having panic attacks in the middle of the night and there was nothing I could do to stop them. I was a healthy 34 year old at the time. I would wake up between 2 and 3 AM every night for weeks with my heart pounding. These symptoms were new for me, out of the blue. Up until that point in my life I managed to raise a family, keep a house, work full time, receive my Master's degree with a 4.0 GPA from Boston College and maintain good health and amazing friendships. I was voted most likely to succeed in high school and didn't plan on anything getting in my way. I value hard work. As a tired, full-time, working mom I decided to go see my primary care doctor because the lack of sleep was getting in the way of my daily life and goals. I was prescribed the antidepressant Celexa. I was sent home and was told to give it a few weeks. My heart pounding panic attacks got worse. I had night sweats accompanied by teeth chattering, nausea, and daily headaches. I called my doctor's office and they upped the dose of the Celexa. This continued to send me into a downward health spiral. No natural alternative methods were offered to deal with the panic, and I did not know enough to ask. I eventually ended back at the doctor's office and I was prescribed Klonopin. I was told to take the Klonopin as needed. I had heard of this drug before, deemed "Mother's Little Helper". Was I just an overwhelmed working mom in society and needed to succumb to medication? Could I not handle the daily pressures anymore? After a few more weeks of feeling even worse, in a brain fog that mirrored nothing else, derealization, body tingles and brains zaps, I went back to my primary care doctor. I told her it was the medication. I was positive about it. She did not believe me. I was then tested for Lyme, Lupus, MS, Diabetes, vitamin deficiencies, received ultrasounds of the GI, and my IUD birth control was yanked in case I was experiencing metal toxicity. These battery of tests are pretty typical for those going through benzodiazepine withdrawal, as the medical community searches for answers to explain patients symptoms. Many are often misdiagnosed with MS, Chronic Fatigue Syndrome, intensifying anxiety or Fibromyalgia. All of my testing was negative. I was not relieved. Now I believed I was dying. I felt like I was dying. What else could be this horrible? My doctor did not know. The physical pain and sensations were unending. I knew in my heart it was the medication. I have learned now, my body developed a tolerance benzodiazepine. After numerous more visits to the doctor I was told I could just stop the Klonopin and quickly wean off the Celexa if I thought that was the problem. Years later my counselor and new primary care doctor said this was absolutely the wrong way to go about getting off these medications.

Then the real hell began. The following is an explanation of why stopping Benzodiazepines can cause horrific damage to every system in the body. Benzos act on the GABA receptor, a calming neurotransmitter that impacts every cell in our body. The Benzos down regulate the GABA, therefore there is an excess of glutamate, an excitatory neurotransmitter that overstimulates the nervous system. GABA and Glutamate work in the body at all times together to balance every single sensation in our systems. Due to withdrawal, the calming GABA was missing, leaving me with an extensive amount of overstimulation due to excessive glutamate. The stress hormone, cortisol, rose greatly, making it difficult up-regulate the GABA as well as throwing off other essential neurotransmitters and hormones, causing issues such as histamine intolerance and estrogen dominance.

I lost over 30 pounds, my legs were heavy, like lead was dragging them around. I developed chronic daily headaches and migraines. My jaw has ached every day for the last 3 years. I had an extreme band of tight pressure around my head, my sinuses felt like they were being choked and my ears rang. Not only did they ring but they popped and cracked relentlessly, along with every other joint in my body. I became restless because my calming GABA was gone. I would walk for hours at night after the kids went to bed. Every nerve in my body felt like it was vibrating and tingling. I had visual disturbances, flashes of light and so many floaters in my eyes, it was often hard to focus. I had a constant feeling of vertigo and dizziness. I had three bouts of the shingles virus. I was cold and clammy all the time. My fingers felt like ice, numb to the touch. My breathing was pressured, like the weight of the world was on my chest, and I had numerous GI symptoms that led to a complete diet overhaul. I had a sensitivity panel done and the one thing that gave me some comfort, like chicken pie, grilled cheese or a warm glass of tea was taken from me. I showed sensitivity to gluten, soy, yeast, dairy, peanuts, celery, carrots, ginger, caffeine and countless other items. These issues were completely nonexistent prior to Benzo withdrawal. There is a direct correlation between the brain and gut connection and the lack of GABA in one's gut can seriously impair digestion. This was difficult enough to navigate alone, explaining it to others was impossible. I had never been this lonely. The pain was invisible. I still follow the strict diet today, otherwise I notice my central nervous system becomes inflamed and will go into overdrive. I have heart palpitations and until just recently, severe hormonal imbalances that lead to inconsistent menstrual cycles and other hormonal issues, causing monthly cysts, sciatic pain and heavy bleeding. I was lucky if I got 3 hours of sleep, insomnia was pure torture. I could not think clearly or focus on anything. It took over two years to be able to read a book and close to three years to watch a movie and be able to follow the plot. In one summer I had over 45 vestibular migraines. I had a numb feeling both physically and emotionally, but somehow managed to go through the motions for my amazing children. They were my reason to fight each day.

During this time I was placed on other medications, but to no avail. I did not realize one of them was another benzodiazepine. The FDA recommends taking these medications for no more than 2-4 weeks with a taper to withdraw. I was on one for 3 months with no taper and another for the jaw tension for almost a year with a liquid taper. My body could not handle anything, and I mean ANYTHING! I saw numerous specialists who did not believe this was possibly caused by the medication, as it was out of my body years ago. Top doctors in Boston told me these medications were safer than Tylenol and Ibuprofen.

I then began my own research, found a supportive counselor and took healing into my own hands. It was the hardest thing I have ever done. My down-regulated central nervous system has fought, and continues to fight me every step of the way. At this point I was diagnosed with two layers of PTSD. The first stress disorder, confirmed by my new primary care doctor, was caused by the lack of support and acknowledgement of my symptoms from the medical community. Continuously being let down... I developed a fear of medications and those that prescribed it. The second level is caused by bodily sensations that occur daily and triggers the time of the unending agony of acute withdrawal. Although I am using mindfulness and meditation to help combat this, a cool breeze against my arm on a summer night, pins and needles in my leg when I sit and read to my kiddos, a knot in my back caused by entering grades on the computer or, a muscle twitch from overexertion can bring me back to the unending torture that I went through.

I realized I was explaining it wrong to the medical community. It's not that I believe I still have Benzodiazepines in my body after three years, it is that I am positive they have caused severe damage to my central nervous system. My body is still in need of healing and tremendous repair and self care. I gained the support of my counselor, family and new primary care doctor. I began with figuring out why the panic began in the first place and I dealt with that unhappy, lonely marriage. I wish my doctor would have pointed that out to begin with, or at least inquired about what may have been going on in my life. I began to practice yoga, mindfulness, meditation, continue to eat organic and eventually worked herbal tea back into my life. I began to appreciate the little things again, as they were taken from me for so long. I turned to online support groups that led me to feel more normal again... and developed hope that this torture will end as my body regulates. I read books on the topic including the Ashton manual, written my Doctor Heather Ashton, who ran a benzodiazepine withdrawal clinic in England for years. It is an amazing guide. I also read and recommend reading Baylissa Frederick's, Road to Recovery and Matt Samet's, Death Grip. I follow numerous blogs online and seek out coaching from those that have recovered before me. I have put thousands and thousands of dollars into treatment to feel better. This has impacted every aspect of my health and life.

The good news is, I am healing, with every ounce of my being, I will not let this win. I am likely to succeed. My adrenals are regulating, hormones are balancing, nerves are regenerating, and although I write this with ice on my jaw and heat on my neck, I will continue to grab hold of holistic methods. I bathe in essential oils, stay grounded through mediation and live to be the best mom, friend, sister and daughter I can be. Life is precious.

I do not want anyone else to go through this. I was one of the lucky ones. Some have lost all, some have taken their own lives... including a family member of mine who had a prescription for Xanax.

Massachusetts has an opportunity to pave the way and lead the change by supporting the Benzo Reform Bill. This will make doctors think twice before prescribing these mind altering drugs, and providing patients with information regarding the dangers of such medications as well as a taper to withdraw. I hope that we can turn this possibility into a reality, as well as provide alternate methods for our humankind to deal with life stress.

Life is too precious to walk through it unnecessarily medicated.

Submitted to MA Commission on the Status of Women Public Hearing, Leominster Public Library January 24, 2017

March 24, 2016

Chairs and Members of the Joint Committee on Mental Health and Substance Abuse State House Boston, MA 02133

Dear Chairs and Members of the Joint Committee on Mental Health and Substance Abuse:

As a citizen of the Commonwealth of Massachusetts, I urge you to support House Bill 4062, The Bill on Benzodiazepines and Non-Benzodiazepine Hypnotics.

The *Reader's Digest* version of my story begins in 1982 when I walked into a clinic with emotional problems and walked out with a prescription for Xanax. Xanax was my "gateway drug" to psychosis, hospitalizations, multiple medications and electroconvulsive therapy. The possibilities of a self-determined life were wiped away with one scribble of a prescription.

Nineteen years after my last inpatient hospitalization, I was taking Ativan, as prescribed, by my psychiatrist of 23 years. I had no idea of the perilous risks associated with its use! Perhaps it was divine intervention that later led me out of my psychologist's office, down the hall, up the crumbling tunnel stairs and into the sunlight.

In October 2015, an angel led me to Robert Whitaker's, *Anatomy of an Epidemic*. I was captivated yet appalled by what I was reading. My story is woven into the stories he chronicles. Finally, decades of physiological complaints validated by everyday people and formal white papers.

I started slowly tapering off Ativan on November 1. The process is as grueling as those before me have reported: headaches, dizziness, nausea, cold sweats, insomnia, night terrors. I and how many others are living daily with damage to our nervous, muscoskeletal, GI, and endocrine systems? How many have yet to learn of the toxicity of benzodiazepines?

Let Boston once again serve as a city upon a hill. Let 2016 be the year for legislating informed consent in Massachusetts. Support House Bill 4062.

Sincerely,

Lauren Omartian Watertown, Massachusetts

Massachusetts Commission on the Status of Women Wareham Public Hearing

Wareham Free Library January 28, 2017

ORAL TESTIMONY

Remarks from Rep. Susan Williams Gifford (R-Wareham). Thanked MCSW for coming to Wareham, important to listen to women's voices and make a difference. Success in passing pay equity last session.

Lisa Field – Massachusetts Nurses Association (MNA)

MNA is working on social and economic justice for all. Predominantly made up of women members. Want to protect universal access to good healthcare. Medicare for all, equal pay, paid sick leave. Educate health care nurses about victims of domestic violence.

Sandy Cormier - resident of Wareham

Became concerned citizen after the election, concerned with loss of freedoms. Personal story with Planned Parenthood: was a huge help when she moved away from home in the 1970s with healthcare. Fought for abortion rights back then, continues to fight now. Not about abortion, it's about giving the choice. Concerned about gay rights and the freedoms of the LGBTQ community. Joined "Indivisible Plymouth", a group that has come together from the larger Plymouth community. Found that there is a huge lack of knowledge about what's going on, how and when to vote. Want to help educate the public. Have come up with the "Indivisible Guide". Need education around fake news and how to tell what is true or not. Event being hosted in Falmouth tomorrow evening. Wants to educate herself and encourage more civic engagement.

Val Bassett - Women's Fund of South Eastern Massachusetts

Want to increase the number of women in the region who earn a living wage. Work is primarily done in the New Bedford area, focus on education and economic security for women. Document "Economic Blue Print for Women". 10 years ago there was a raid at a factory in New Bedford targeted at undocumented immigrants, many of whom were parents. Increasing fear that this can happen again. Many families were broken up. Action for Women of South Eastern Massachusetts. Concerned about the security of immigrant women, access to reproductive healthcare. They are hosting an International Women's Day event that is focused around immigrant women. Median income for single women in the cities in this area is around \$19K. Need stronger regional supports, affordable child care, protect the safety net, free legal services, universal pre-K, state child care, PFML. Want to encourage civic leadership with their mentorship programs. Desperate for more EOSL funding. Support for fair tax amendment to create additional funding for needed programs. Want to connect with a non-partisan organization that helps women run for office.

Deb Etzel - League of Women Voters

Strong support of civics education, they host a civics bee in 7 area high schools. Focus on community education and local issues. 70-80% of people in region are registered to vote, the problem lies with getting people out to vote in non-presidential elections. Host candidates forums. Difficulty in spreading the word about voting.

Glenda Izaguirre - Congressman Bill Keating's office

Keating is supportive of women's rights, affordable healthcare, VAWA. Believes in fair wages and equal pay for equal work. Here to be a partner.

Katia DaCunha - local resident

Need more access for immigrants to learn English and become part of the community. Most immigrants want to be useful and to help the community. Needs to be recognized that immigrants experience domestic violence and sexual assault differently. Need to build trust with immigrant community so they can get the help and resources they need.

Sarah Thornington - local resident

Self-employed, owns a photography studio with her husband. Healthcare is her biggest concern, they pay for their own. Women are often not looked at for management positions. Opioid crisis is massive, it's everywhere – heroin is a huge issue locally. Concerned that Governor cut funding for some of these services. Concerned about the funding cuts for programs for the arts. Concerned about the environment and the number of climate change deniers. Has a daughter who wants to go to medical school, concerned with amount of student loans that she will have to take out.

J. Abra Degbov - New Bedford

Not enough funding or resources for mental health. Affordable childcare would help all women in a lot of ways, would empower the economy and families, lead to healthy children and a more upward society. Referenced an article from the 2016 Boston Globe.

Joella Cruz

RN at St. Luke's Medical Center, husband was in politics. Massive opiate problem, many babies born addicted to drugs. Ask about domestic violence at in-take. Women need ways to work. Behaviors of those who had children taken away by DCF previously don't change, come back in addicted to drugs while pregnant. Continuous cycle.

Michelle Keith - Bristol County Commission on the Status of Women

Action Together South Eastern Massachusetts. Work towards solutions, disseminate information. Operate through a secret Facebook group. Collaborated for a showing of "The 13th" from Netflix, shows how slavery has never actually been abolished.

Massachusetts Commission on the Status of Women



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